## PROGRAM: MEMBERSHIP

## Unit Annual Narrative Report 2024-2025

## Department of Wisconsin Submit to Department Headquarters by 4/15/25 only if you participated in any of these activities:

U	Init # District #			
N	ame/Title (of person completing form)			
Email Address Phone:				
1.	Did your District President/District Membership tear	m contact your unit?	☐ Yes ☐ No	
2.	Did the unit reach out to former members and ask th	•	☐ Yes ☐ No	
3.	Did the unit attract new members?	, and the second	☐ Yes ☐ No	
	Did your unit have a membership table at unit sp If yes, please send a picture.	onsored events?	Yes No	
	Did the unit provide "New Member Packets"? It	f so, how many:	☐ Yes ☐ No	
	Did working the ALA programs help recruit new	members?	☐ Yes ☐ No	
	How many male spouses of veterans joined the A	ALA this year?		
	How many other new members joined this year?			
4.	How did the unit attract new members? (If necessary, or	continue on separate sheet)		
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7.	If yes, which units were assisted? ie: transfers or recruited for another unit (If necessary, continue on separate sheet)  Did your unit/members participate in Membership discussions, with your post,  County or district? Please describe results and any take away ideas. (If necessary, continue on separate sheet)			
8.	ow often did your unit make salute calls to its members? (If necessary, continue on separate sheet)			
9.	Did the unit use communication, social media, good build membership? If so, how? (If necessary, continue of	1 0	☐ Yes ☐ No	
10.	. Does the unit have a success story to share? (If necess	ary, continue on separate sheet)	Yes No	
Use flip side or separate sheet to list any Membership activities, events and projects the unit was involved in				
Please complete and return by <u>APRIL 15, 2025</u> to:		American Legion Auxiliary, Dept of Wisconsin PO Box 140, Portage WI 53901-0140		