

BEST BUDDIES



CANADA

# CHAPTER LEADERSHIP TEAM ROSTER

School Name: \_\_\_\_\_

Title	Student's Full Name	Phone Number	Email Address
<b>Chapter President</b> - Runs Chapter			
<b>Co-Chapter President (if applicable)</b> -Runs Chapter			
<b>VP of Marketing</b> -Communicates with Head Office			
<b>Leader in Training (formerly known as Buddy Advocate)</b> -Has the potential to be a great leader			
<b>Fundraising</b> -Plans Fundraising			
<b>Membership Coordinator</b> -Monitors Matches			
<b>Activities Coordinator</b> -Plans Special Events			
<b>Staff Advisor</b>			
<b>Staff Advisor</b>			
<b>Other</b> -Please specify			
<b>Other</b> -Please specify			