



National Black Association for Speech-Language and Hearing

701 Exposition Place, Suite 206, Raleigh, North Carolina 27615
Phone/Fax: (919) 661-0820 • Email: nbaslh@nbaslh.org • www.nbaslh.org

NBASLH Affiliate Recertification Form/Annual Report (Revised January 2022)

As a recognized NBASLH affiliate, you are required to annually recertify your affiliate. **Please complete this form and return it to the NBASLH National Office by February 15th of the following year.** An affiliate will remain in good standing with the National Office if the local chapter officers maintain current membership in National NBASLH. Failure to comply with these requirements will place your affiliate in an inactive status.

Select Affiliate Recertification Status:

- University Affiliate: 75% of members or more are students and are required to have 50% of members pay students fee for membership in the Association.
- Professional Affiliate: 75% of members or more are professionals and are required to have each member pay for membership in the Association.

Affiliate Name: _____

Authorized Correspondent: _____

Address: _____

Phone # (home): _____ (work): _____

Fax # _____

E-mail address: _____ Website address: _____

Affiliate President: _____ Affiliate President-Elect: _____

E-mail address: _____ E-mail address: _____

Term: _____ Term: _____

Secretary: _____ Treasurer: _____

E-mail address: _____ E-mail address: _____

Term: _____ Term: _____

Note: If your affiliate is inactive, please check the box below and return this form to the National Office.

- This Affiliate is inactive. Please remove us from the active list.

Include the following in your annual report:

1. NBASLH Affiliate Recertification Form
2. List of committees and chairs
3. Membership roster of affiliate
4. List of membership dues charged
5. Summary of activities (by month, if possible) completed by affiliate. Include the following – fund raising activities, community activities, scholarships, public programs, etc.
6. Calendar of projected activities for the upcoming year.
7. Recommendations:
Please include recommendations for your affiliate and/or for the national organization.
8. Attach a copy of your financial report.

THANK YOU FOR COMPLETING THIS ANNUAL REPORT AND SUBMITTING IT TO THE NATIONAL OFFICE BY FEBRUARY 15th. Please note that reports received by the deadline will be considered for the Affiliate of the Year award. Failure to submit an annual report will result in suspension of the Affiliate.

Please retain a copy of your annual report for your records.

Return this completed form to:

**National Black Association for Speech-Language and Hearing
701 Exposition Place, Suite 206
Raleigh, NC 27615**

Scan and Email to: [nbash@nbash.org](mailto:nbaslh@nbash.org)

ANNUAL FINANCIAL REPORT

Financial Report for _____ (Name of Affiliate) Report Date: _____

Previous Balance: \$ (insert previous balance a year ago) December 31, xxxx	
Receipt since last report:	
Previous Balance	\$
For the fiscal year which ended December 31, xxxx (insert the previous year)	
Membership Income	
Membership Dues	
Total Membership Income	
Conferences, Conventions, Seminars	
Registration Income	
Exhibit Income	
Other Income	
Total Conferences, Conventions, Seminars Income	
“Other” Income	
Contributions	
Fundraising Activities (not dues or refunds)	
Other Income (please list)	
Total “Other” Income	
Total Income	
Expenses	
Printing & Copying	
Postage	
Supplies	
Honoraria	
Authorized Travel Expenses	
Other Expenses (please list)	
Total Expenses	
December 31 – Balance on Hand	