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| **NNJSDA MEMBER CLUB NAME**: | **Roster as of November 1, 20\_\_** |
| **Submitted by (Name and Position)**: |  |
| *One person per line, please. In the “phone” column, list only the primary number (whether home or cell).* |

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|  | **LAST NAME** | **FIRST** | **PHONE** | **STREET ADDRESS** | **CITY** | **ST.** | **ZIP** | **EMAIL** |
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|  | **HONORARY/LIFE MEMBERS** |
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