

CORVA LETTER OF ASSIGNMENT Non-Club Delegate

Date:	
l,	, give authority to my delegate
	to vote on my behalf at the CORVA Annual meeting.
Signed,	
(Signature of CORVA member)	
Printed name	
CORVA membership #	
Phone # (for verification reasons)	
Address	
City, State, Zip	
Email address	

Please contact membership@corva.org to validate members standing prior to the election.