

## **GSNA NAC STATE AFFILIATION FORM**

## **NUTRITION ADVISORY COUNCIL GEORGIA**

All NAC groups must re-affiliate <u>each</u> year. If you are applying for the NAC of the year you MUST re-affiliate by **October 1st**.

Check one:	□ New Chapter	□ Re - Affiliation	
Name of council			
Name of school			
Address of school			
Telephone number of school			
GSNA Local Chapter name and District			
1		2	
How many students are in your council?  Please give the names of officers for the 2022-2023 school year			
J	es of officers for the 20	·	
Secretary			
Treasurer			
Other			
1	ou hope to participate		
What kind of resources does your NAC need to become more effective?			
Send To: GSNA	Main St	<del></del>	

Tucker, Georgia 30084-4456

**GSNA NAC Affiliation Form**