UNIT NAME CHANGE
INSTRUCTIONS

1. Complete the APPLICATION FOR AUXILIARY UNIT NAME CHANGE following all the requirements on the form.
   
   a. Have your members approve the name change by majority vote and make sure the Secretary records the vote in the meeting minutes.

   b. If the name change is to honor a deceased Marine or Auxiliary member, attach a letter from the next of kin authorizing the use of the name.

   c. If the Unit is renaming the Auxiliary to coincide with a Detachment’s name change, please attach a letter from the Detachment Commandant authorizing the use of the Detachment’s name.

   d. Fill out the Application completely and have the form signed by the Unit President and Secretary.

2. Mail the completed form and authorizing letter to the Department President. If no Department exists, send the completed form and letter directly to the Division Vice President.

3. The Department President and/or Division Vice President will sign and forward to the National President.

4. If approved, you will receive the renamed charter from the Department or Division.
APPLICATION FOR AUXILIARY UNIT NAME CHANGE

MARINE CORPS LEAGUE AUXILIARY
3619 JEFFERSON DAVIS HWY SUITE 115
STAFFORD VA 22554

To: National President
Via: 1. Department President
      2. National Division Vice President

Date: ________________________

Dear Madam President:

The undersigned request that the name of our unit be changed as follows:

Name on Original Charter __________________________________________
New Name ______________________________________________________

We hereby certify that the Unit has voted on this name change and it was approved
by a majority vote. This motion was recorded in the minutes of our meeting dated:
_____________________________________.

If the Unit name is being changed to coincide with a Detachment name change, we
have attached a letter signed by the Detachment commandant authorizing the use
of the name.

We also agree that with the issue of this new charter the rules and regulations that we agreed to
on our original charter still apply.

_________________________                          __________________________
Unit President Signature      Unit Secretary Signature

_________________________      ___________________________
Unit President Name     Unit Secretary Name

APPROVED:

_________________________       __________________________
Department President        Division Vice President

_________________________        __________________________
National President          Date Charter Issued