



## MEMBERSHIP TRANSITION FORM

Name: \_\_\_\_\_ Chapter: \_\_\_\_\_  
Last First Middle Maiden

Current Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Status: \_\_\_\_\_ New Member \_\_\_\_\_ Active \_\_\_\_\_ Associate \_\_\_\_\_ Emeritus \_\_\_\_\_ Member on Leave \_\_\_\_\_ Reinstated

Date Inducted as Chum: Year \_\_\_\_\_ Month \_\_\_\_\_ Name of Chapter: \_\_\_\_\_

\_\_\_\_\_ Chapter Acknowledges the member is \_\_\_\_\_ Financial \_\_\_\_\_ Not Financial

### Request to transfer Chum Chapter:

\_\_\_\_\_ I have moved to another state/city where there is a Chum Chapter \_\_\_\_\_  
New Chapter Name

### Request Associate Member Status:

\_\_\_\_\_ I have moved to a state/city where there is no Chum Chapter

Request Emeritus Member status: Reason: \_\_\_\_\_

\_\_\_\_\_ I am seventy years old and have been an active member for the past twenty-year's \_\_\_\_\_ to \_\_\_\_\_

Resignation Date: \_\_\_\_\_ Reason: \_\_\_\_\_ Deceased: \_\_\_\_\_

Change of Name \_\_\_\_\_ Change of Address \_\_\_\_\_

New Name: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

MEMBER

DATE

CHAPTER PRESIDENT

DATE

NATIONAL VICE PRESIDENT

DATE

### INSTRUCTIONS:

- Submit within 30 days of transition to the National Vice President
- The National Vice President will provide updates to the President and National Financial Secretary
- Member and Chapter President should keep a copy.

Chums, Incorporated  
501c3

Revised 2/2019