



NOTIFICATION OF CHANGE IN MEMBERSHIP INFORMATION

Pilot Club of _____ District _____ Date _____

INSTRUCTIONS: Complete this form for changes (additions, deletions, change of name, address or membership status). Mail **original with appropriate funds to Membership Records Dept.**, Pilot International, 102 Preston Court, Macon, GA 31210-5768. Send a copy with the appropriate funds to the District Treasurer and a copy to the District Governor and District Secretary.

IMPORTANT: *This form is due to PI Headquarters one (1) week after new member is initiated.* Form may be found on the PI website and may be completed on line and printed for mailing.

In order to create a more efficient membership database and record keeping system, the following categories should be used when determining membership types.

Dues Paying:

Pilot : Active club members.
 Pilot International: Active members with no home club affiliation.

Waived Dues:

Pilot Waived: Fifty year members and deployed military members.
 Pilot International Waived: Fifty year members with no home club and deployed military members.
 Honorary/Emeritus: Members who have earned Emeritus status and Honorary Pilots.
 Pilot Student: College students, former Anchors, scholarship recipients that wish to attend Pilot club meetings.
 NOTE: Upon graduation, ALL Anchors attending college are encouraged to apply to become Pilot students.

	July-September	October-December	January-March	April-June
Dues	60.00	45.00	30.00	15.00
Club Insurance	6.00	6.00	6.00	6.00
TOTAL DUES	\$66.00	\$51.00	\$36.00	\$21.00

CHANGES SINCE PREVIOUS NOTIFICATION:

A. Addition of New Member(s). Membership information for each new, transferred or reinstated member with a check for dues, initiation and liability insurance **must be** included with this report. *If a transfer member - list name of previous club.*

MEMBER	Date Membership Began	Amount Insurance	Dues	Total
Name				
Name				
Name				
Name				
Name				

B. Change(s) in member's name, address, phone or membership status. (Please print clearly)

Change From

Change To

Name:		
Address:		
City/State/Zip:		
Contact/Cell Phone:		
Email:		
Membership Status:		
Name:		
Address:		
City/State/Zip:		
Contact/Cell Phone:		
Email:		
Membership Status:		

C. Deletions. List member(s) who have been removed from the club membership roll. Please check the applicable box.

NOTE: If member transferred to another Pilot Club, state the name of the club, city and state.

<u>Name and Address</u>	<u>Reason</u>	<u>Date</u>
	Moved <input type="checkbox"/>	
	Deceased <input type="checkbox"/>	
	Health <input type="checkbox"/>	
	Resigned from club <input type="checkbox"/>	
	Transferred <input type="checkbox"/>	
	No Interest <input type="checkbox"/>	
	Non-Payment <input type="checkbox"/>	
	Not Enough Time <input type="checkbox"/>	
	Other <input type="checkbox"/>	

Signature of Club Recording Secretary

Revised 07/2022