



Change in Membership Form

Please type or print.

Type of Change Reinstatement Transfer Deletion
 Change in Name Change of Address Change of Membership Status

Pilot Club of _____ District _____

Name _____

Mailing Address _____

_____ Country _____

Phone _____ Email _____

*If deletion, please check appropriate box.

Moved Health Death Resignation No Interest Non-payment Time

*If change in name, address, membership status, or club transfer, please write previous information.]

_____ Date of change _____

In order to create an efficient membership database, the following categories should be used to determine the membership type. Please indicate the current membership status.

- | | | |
|--------------|---|---|
| Dues Paying: | <input type="checkbox"/> Pilot: | Active club member |
| | <input type="checkbox"/> Pilot International: | Active club member without home club affiliation |
| Dues Waived: | <input type="checkbox"/> Pilot: | Fifty year members and deployed military members |
| | <input type="checkbox"/> Pilot International: | Fifty year members and deployed military members without home club affiliation |
| | <input type="checkbox"/> Emeritus: | Club charter member or Pilot for 15 consecutive years (see Bylaw VII for additional requirements) |
| | <input type="checkbox"/> Honorary: | Non-Pilot in recognition of meritorious achievement (see Bylaw VII for additional requirements) |

Dues Schedule	July-September	October-December	January-March	April-June
International Dues	\$60.00	\$45.00	\$30.00	\$15.00
US Insurance*	\$6.00	\$6.00	\$6.00	\$6.00
District Dues				
Club Dues				
TOTAL				

*members outside of the US are exempt to insurance fee

Club Officers' Checklist

- | | |
|---|---|
| <input type="checkbox"/> Copy Membership Form and keep for club records | <input type="checkbox"/> Copy of Membership Form and dues to District Treasurer |
| <input type="checkbox"/> Membership Form and dues to PIHQ | <input type="checkbox"/> Copy of Membership Form to District Secretary |
| | <input type="checkbox"/> Copy of Membership Form to District Governor |