

## Associates of Vietnam Veterans of America, Inc.

## **Membership Transfer Form**

Submit to: AVVA Membership Dept. | 8719 Colesville Rd., Suite 100 | Silver Spring, MD 20910 Or Fax to: 201-585-0519 with coversheet addressed to AVVA Membership Dept.

MEMBER INFORMATION	V:		
	<del></del>	Member ID#	
Address:			
		Zip:	
FORMER CHAPTER INF	ORMATION: (transferring t	rom:)	
Chapter number:	or At-Large in State of:		
Chapter Mailing Address:			
		Zip:	
TRANSFER TO INFORM	ATION:		
Chapter Number:	or At-Large i	or At-Large in State of:	
Chapter Address:			
		Zip:	
REQUIRED SIGNATURE	<u>s:</u>		
Transferring Member:		Date:	
*New Chapter or State Rep/	Pres	Date:	
	ate rep/pres. the regional directo		

## **MEMBER TRANSFER PROCESS:**

- 1. Member transfer must be initiated by the member, him/her self.
- 2. Both the member and the 'transferring-to' chapter official must sign the form.
- 3. The chapter rep/pres from the transferring-to chapter will forward a copy of the transfer form to the transferring-from chapter, the state rep/pres, and to the National Membership Department.
- 4. The National database will be updated and a replacement membership card sent to the member.
- 5. All sections must be completed in full in order to be accepted.

Revised: 10/16 F-Mem07.03