

## **Transfer Request**

The transferring member is responsible for completing this form. Please read carefully the instructions given below before completing the form.

Date:	Member ID Number:
Name	»:
Mailiı	ng Address:
City:	State: Zip: County:
Prefer	rred Email Address:
Telep	hone Numbers: (Home) (Cell)
Emplo	oyment Location: (city and state)
Forme	er Mailing Address:
Туре	of membership:
Highe	est degree:
Date of	of Birth:
Name	e of chapter to which dues were last paid: Date of Payment:
	Name of chapter FROM WHICH TRANSFER IS REQUESTED
	State of
	Name of chapter TO WHICH TRANSFER IS TO BE MADE
	State of

Please give this completed form to the treasurer of the chapter you wish to transfer. She will initiate the transfer through the dues portal.

## **Instructions for Transfer**

A member in good standing may be transferred from one unit of the Society to another. All transfer requests must be processed by the chapter treasurer receiving the transfer. The process is as follows:

- Fill out and send to the chapter treasurer to which you wish to transfer. Society Headquarters will provide help in locating a suitable chapter should you require.
- Keep dues payment current. Dues are payable to the chapter treasurer by June 30. If a new chapter has not been located and the transfer cannot be processed before July 1, members should pay dues to their current chapter. Upon the member's request, the current chapter may waive *chapter* dues for the next year since the member will not be in attendance at its meetings. The member will then have a full year to visit chapters and complete the transfer before the next dues deadline.



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