

VVA MEMBERSHIP TRANSFER FORM

Mail or Fax completed transfer form to:

Vietnam Veterans of America 8719 Colesville Road, Suite 100 Silver Spring, MD 20910

Fax: 301-585-3019

Name:		Membership No:	
Address:		·	
	State:		Zip:
Phone:	E-mail:		
TRANSFERRING TO: Ne	w Chapter Number:		
Chapter Address:			
City:	State:		Zip:
Print name and title of official or State Co	uncil	Date:	
Signature and Title of official in new chap	nter or state council		
TRANSFERRING FROM:			
For	mer Chapter Number:	State:	
		Date:	
Signature of member requesting transfer			
Note: The chapter that the individemail it to the new 'transferi	ual member is transferring from should re ing to' chapter or state.	move the individual's DD-21	4 from their files and
Member Transfer Processing Instructio 1. Member transfers may be 2. Two signatures are require state council that a memb 3. The membership chair from	<u> </u>	ship chair (or other designated of d Member Transfer Form. ward the New State Council copy	official) from the chapter or y of the Member Transfer

- 4. The national data base will be updated and a replacement member card will be sent to the member.
- 5. The National Membership Dept. will forward a copy of the Member Transfer Form to the former chapter to advise them of the transfer.

For Office use only:

State Council's Copy

Transferring To Chapter 's Copy

Former Chapter's Copy