Date:	
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## Soroptimist International of the Americas Membership Information Change or Termination Form Email: siahq@soroptimist.org ● Telephone: 215/893-9000 ● Fax: 215/893-5200

Member #:		Member Name:	
	Name Change From:	To:	
	Address or Zip/Postal Code Change: Address:		
		Zip/Postal Code:	
	Phone Number Change:		
	☐ Business (including area code):		
	☐ Home (including area code):		
	☐ Mobile Phone:		
	Fax Number Change:		
	E-mail Address Change:		
	Change of Member Type: For comple	te definition of Regular membership type, see the	Federation Bylaws on the website.
	☐ Life Member to Regular Member membership status is forfeited an	The PLEASE NOTE: once a Life member is change and can never be changed back.	ed to a Regular member, Life
	Transfer into Club:	Club	#:
	Transfer out of Club:	Club	#:
	Change of Officer:		
	Position:	President (Name):	
	☐ Member #:	Treasurer (Name):	
	Termination/Resignation		
П	Termination/Death		

Please send to SIA headquarters. Retain copies for region treasurer and club file.