

RESIGNATION OF MEMBERSHIP

Member's Name _____

Member # _____

Chapter Name _____

Region _____

Member's Address _____

Important information for resigning member:

1. If you submit this form to International Headquarters, your name will be removed from membership in Sweet Adelines International – not just your current chapter.
2. If you resign and later desire to reaffiliate with a Chapter (including your present Chapter or Chapter-at-Large*), you must meet the membership admittance requirements, including payment of another Per Capita Fee.
3. **If you plan to transfer, do not submit this resignation form. You must be a current member to transfer your membership.**
4. Per Capita Fees are not refundable.

(*Note: Chapter-at-Large information available upon request.)

I find it necessary to resign from Sweet Adelines International. I have read the above information and understand its meaning.

My primary reason for resigning is: (Circle only one reason. Use the space below for additional reasons and/or comments.)

- | | |
|------------------------------------|--|
| A. Financial | K. Does not meet my expectations |
| B. Takes too much time | L. Chapter and personal goals conflict |
| C. Travel/Retirement | M. Chapter problems |
| F. Moving | O. Lack of musical quality or leadership |
| H. Illness | P. Lack of administrative leadership |
| I. Family obligations | Q. Personality conflict |
| J. Conflict with other commitments | T. Distance to rehearsal too far |

Comments: _____

Member's Signature

Date

Instructions: The resigning member should complete this form and mail it to:
Sweet Adelines International, P.O. Box 470168, Tulsa, OK 74147 *** FAX 918 665-0894