MEMBERSHIP CHANGE REPORT

**IAFF Local: Local Name: Date:**

**PLEASE PRINT CLEARLY**

**FOR A *FASTER AND EASIER METHOD,* EMAIL CHANGES TO laura@wscff.org or call (360) 943-3030**

Thank you for helping us keep our records current!

Please indicate the reason for the change by circling one of the options above ‘Last Name.’

**A = Add New Member L= Left Fire Service & Delete from Database O=Opted-Out of Union T = Transfer**

 **R = Retired (non-dues paying) RA = Retired Active (paying dues to the WSCFF) OC = Officer Change**

For an Officer Change, please be sure to specify the reason, i.e. Is the officer being added or deleted as an officer?

**A L O T R RA OC**  **A L O T R RA OC**

|  |  |
| --- | --- |
| Last Name | Last Name |
| First Name | First Name |
| Address | Address |
| City | City |
| State | State |
| IAFF # if available | IAFF # if available |
| Cell ( ) | Cell ( ) |
| E-mail | E-mail |
| Officer: (circle) • Pres • VP • Sec • Treas • S/T | Officer: (circle) • Pres • VP • Sec • Treas • S/T |
| Transfer to OR from (circle one) Local #:  | Transfer to OR from (circle one) Local #:  |

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|  |  |
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