TRANSFER FORM

CATHOLIC DAUGHTERS OF THE AMERICAS

NOTE: TO BE COMPLETED BY FINANCIAL SECRETARY OF COURT FROM WHICH MEMBER IS TRANSFERING. MUST BE SIGNED BY REGENT AND FINANCIAL SECRETARY

_____, *20*_____

THIS IS TO CERTIFY THAT
Print or Type:
(Miss)
I, (Mrs.)_____

Address_____**City**_____**State**_____**Zip**_____
WAS ADMITTED TO MEMBERSHIP IN

Court_____**No.**_____**City**_____**State**_____

ON_____, _____**(date joined)**

SHE HAS PAID ALL INDEBTEDNESS UP TO_____
THIS TRANSFER CARD IS GRANTED BY:

_____, **REGENT**

_____, **FINANCIAL SECRETARY**

TO BE COMPLETED BY TRANSFERRING MEMBER:
Herewith is my transfer card from:

Court_____, **No.**

Requesting membership in Court_____**No.**

Signature of transferring Applicant_____

Address_____**City**_____**State**_____**Zip**_____

Telephone_____**E-mail**_____

TO BE COMPLETED BY FINANCIAL SECRETARY OF NEW COURT TO WHICH THE MEMBER TRANSFERS, THE FINANCIAL SECRETARY OF THE NEW COURT SEND THE APPLICATION TO NATIONAL OFFICE:

RECEIVED IN COURT_____, **NO.**_____ **ON** _____, **20**____

_____**FINANCIAL SECRETARY**

PLEASE NOTE:
***Original** copy to be sent to the National Office*
***Send** a copy the State*
***Keep** a copy for your records*

KINDLY SUPPLY information requested below

CATHOLIC DAUGHTERS OF THE AMERICAS

APPLICATION FOR

TRANSFER FORM

_____

(name)
TRANSFER OF MEMBERSHIP FROM

COURT_____***NO.***_____

CITY_____***STATE***_____

TO:

COURT_____***NO.***_____

CITY_____***STATE***_____

_____

(Signature of Regent)

***IMPORTANT:** TRANSFER FORMS ARE VALID ONLY FOR NINETY (90) DAYS FROM THE DATE ISSUED.*

***NOTE*: The Financial Secretary shall forward this Transfer Form properly filled out to the National Office at 10 West 71st Street, New York, NY 10023 within five days after the transfer member is received into the Court.**

Order #102 (Rev. 2002)