

Transferring Membership of Location

Date: _____ Location: _____

Land Description: _____

Members Name: _____

Address: _____

New party responsible for location: _____

Address: _____

By signing this form below the Member listed above understands he/she will be terminating his/her membership to the listed location. If additional locations apply they are listed below

Signature of Member

Date

Additional location:

Location # _____ Land Description: _____

Location # _____ Land Description: _____

Location # _____ Land Description: _____

New Address: Name: _____

Address: _____

Phone: _____

As a member you have capital credits to be paid in the future, please keep us updated on your address.