



Special Forces Association Chapter 4-24
 Attn: Membership Committee
 P.O. Box 17508, Colorado Springs CO 80938



MEMBERSHIP TRANSFER FORM

- This document is used to transfer membership to Chapter 4-24.
- Complete all portions of the transfer form and submit to the membership committee at membership@sfa4-24.org

I hereby apply to transfer of my membership in the Special Forces Association to Chapter 4-24 and submit the following information:

Name (First, MI, Last)		SFA Membership Number	
Street Address			
City		State	ZIP Code
Primary Phone		Email (Personal Email DO NOT ADD WORK EMAIL)	

I am a current member, in good standing of the Special Forces Association Chapter _____.

Note: Enter N/A, if you are a SFA member and not currently assigned to a Chapter,

Signature

Date

Distribution Instructions for Chapter 4-24 Membership Committee:

1. Send Original to SFA HQ
2. Send Copy to Losing SFA Chapter
3. Retain copy SFA Chapter Records