



PGA

RETURN TO SECTION:

PGA MEMBER CHANGE FORM

FOR SECTION USE ONLY
Fine is applicable for no notification within 10 days.
Fine Amount \$50 after the 11th business day.
If new facility, attach recognized paperwork.
Are constitutional classification requirements satisfied?
Yes No
By:

Name: _____ (First) _____ (Middle Initial) _____ (Last)

Member #: [] [] [] [] [] [] [] [] Last 4 Digits of Social Security Number: [] [] [] [] [] [] [] []

HOME ADDRESS

Street or Box Number: _____

City: _____ State: _____ Zip Code: _____ Home Phone: _____ Mobile Phone _____

SEND ALL MAIL TO: [] Personal/Home [] Facility/Company Email Address: _____

FORMER EMPLOYMENT INFORMATION

(Name of Facility/Company)

Date termination notice given: ____/____/____

(City) (State) (Zip Code)

Last date of employment: ____/____/____

PGA Section for this employment: _____

Contract Ends: ____/____/____

Classification for this employment: _____

NEW EMPLOYMENT INFORMATION

For Office Use Only

[Empty box for Facility/Company Number]

Is this a facility/company under construction? [] Yes [] No

Facility/Company Number: _____ If yes, scheduled completion date: ____/____/____

(Name of Facility/Company)

(Physical Street Address)

(City) (State) (Zip)

(Mailing Address, If Different Than Above)

(City) (State) (Zip)

Facility/Company Phone No.: (_____) _____ Fax No. (_____) _____
Area Code Area Code

Classification for new employment: _____ Title: _____ Section: _____

Date contract signed (or verbally agreed to): ____/____/____ First date of employment: ____/____/____

Are you: [] Retired Date you retired: ____/____/____ [] Unemployed Last date of employment: ____/____/____

Your Signature _____ Date ____/____/____

Signature of PGA Member with most management authority _____ Date ____/____/____

Print Name of PGA Member with most management authority _____