

United States Power Squadrons®

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Application for Change of Membership Status

From:					
Squadron		Acct#	D#	Today's Date	
USE THIS SECTION TO: (1) Change Family Member (3) Change Active Member (5) Change Active Member		er (4) Change Addition	onal Active Membe	er to Active Member	
Section A: (Must Circle One) Ch	ange Status to ADDITIONA	L ACTIVE MEMBER	or ACTIVE MEME	BER or FAMILY MEMBER	
Current Certificate #	Birth Date (Day/Month/Year)	Active Member's C	ert#	Active Member's Name	
Name:			•		
Address:					
City, State, Zip Code:					
Phone# (Including Area Code)_					
		you have a previous co			
USE THIS SECTION TO: (1) Add a new Additional Ad (2) Add a new Family Meml Section B: (Must Circle One)				rictions on family membership).	
	NAL ACTIVE MEMBER or	a NEW FAMILY ME	MBER to an existing	ng active member household	
New Member's Birth da (Day/Month/Year)	te Active Memb	Active Member's Certificate #		Active Member's Name	
New Member's Name					
Address					
SityState					
		ding Area Code)			
nfluenced By:			Certificate #:		
	lying for Active or Additional able dues and fees will be bi			,	
	mCom Chairman	ow - MemComCh		Date Changes to be effective	