

# LeTip Transfer Application

Type or Print legibly



Transferring from: LeTip of \_\_\_\_\_ State: \_\_\_\_\_

Transferring to: LeTip of \_\_\_\_\_ State: \_\_\_\_\_

Name, Last: \_\_\_\_\_ First: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Tel: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ email: \_\_\_\_\_

***Your Transfer Application must be completed and returned with a letter of acceptance from your incoming chapter's board.***

## 1. Transferring Member affirms :

- I spoke to: \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_ at LeTip Int'l (800-255-3847) to verify the following:
- I have verified my membership is:     Personally Owned     Company Owned
- I have verified my next renewal is due on: \_\_\_\_/\_\_\_\_/\_\_\_\_
- I have verified my LeTip International, Inc. account is current: \_\_ Yes            \_\_ No

- I have included a \$100 Transfer Fee to LeTip Int'l. Payment information is on the attached Membership Application.
- I have paid my incoming Chapter Fee of \$ \_\_\_\_\_ to my new chapter.

## 2. Departing Chapter President affirms the following information:

- This member has no debt owing to the departing chapter.
- This member has met the attendance and tipping requirements of LeTip International.
- This member has left our chapter as a member in good standing.
- This member has made a concerted effort to find a chapter replacement (or departing chapter prefers to fill vacancy).

\_\_\_\_\_  
Departing President's name (printed)

\_\_\_\_\_  
Departing President's Signature

## 3. Incoming Chapter President affirms the following information:

- I have spoken with the departing chapter president listed above, regarding this member's chapter status.
- Inspection of this member's place of business has occurred, as detailed on the attached membership application.
- This member has been voted in and accepted by the chapter membership.

\_\_\_\_\_  
Incoming President's name (printed)

\_\_\_\_\_  
Incoming President's Signature

Regional Director's Signature: \_\_\_\_\_ Dated on: \_\_\_\_/\_\_\_\_/\_\_\_\_

## LeTip International, Inc.

4838 East Baseline Road, Suite 123, Mesa, AZ 85206-4675 • tel: 800-255-3847 • fax: 480-264-4644

**Mail or fax original, signed document to LeTip International. Print additional copies for Chapter and Member.**