



# Member Service Requirement Reporting Form

Please print this form and attach all documentation.  
**RETURN TO YOUR SECTION OFFICE FOR APPROVAL**

### FILL IN THE INFORMATION BELOW

MEMBER NAME \_\_\_\_\_  
First Middle Initial Last

MEMBER ID # \_\_\_\_\_

EVENT NAME \_\_\_\_\_

EVENT LOCATION \_\_\_\_\_

START DATE \_\_\_\_\_ END DATE \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

TIME START \_\_\_\_\_ END TIME \_\_\_\_\_

AGENDA ATTACHED  YES  NO

LETTER OF VERIFICATION ATTACHED  YES  NO

MEMBER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
MM / DD / YYYY

### FOR SECTION USE ONLY

Please attach either the event agenda or letter of verification from the individual(s) hosting the event:

Section's Official Signature \_\_\_\_\_ DATE \_\_\_\_\_  
MM / DD / YYYY

TIME START \_\_\_\_\_ END TIME \_\_\_\_\_

**Fax to (561) 624-8439 or Email: TABishop@pgahq.com or MAmigo@pgahq.com**