



# BEFA Pilot Update Form

<b>Name</b>		<b>Membership: Class/Type</b>	
<b>Address</b>		<b>Pilot Type (S/P/C/ATP)</b>	
<b>City, State, Zip</b>		<b>Category Class (SEL/SES)</b>	
<b>Cell Phone #</b>		<b>Flight Review (MM/DD/YY)</b>	
<b>Work Phone #</b>		<b>Medical Exam Date (MM/DD/YY)</b>	
<b>Email</b>		<b>Medical Class I, II, III, Basic</b>	

**Share Upgrade:**     Class I to Class II             Class II to Class III            Date: \_\_\_\_\_

**Resignation:**            Effective Date: \_\_\_\_\_

*Reason for Resigning:*  
 \_\_\_\_\_  
 \_\_\_\_\_

**Leave of Absence (LOA):**    Effective Date: \_\_\_\_\_

*Reason for LOA:* \_\_\_\_\_

**Return to Active Status:**    Effective Date: \_\_\_\_\_

*Pilot Signature* \_\_\_\_\_ *Date:* \_\_\_\_\_

**Board Approval for return to Active Status:** \_\_\_\_\_ *Date:* \_\_\_\_\_

Accounting Use:     Chart-List Adjusted     Status adjusted     Charges Invoiced            *Date:* \_\_\_\_\_

Recurring Charges Adjusted - FBO     Recurring Charges Adjusted - FSP