

**GEORGIA DISTRICT, PILOT INTERNATIONAL  
2021-22 MEMORIAL FORM**

Club Name: \_\_\_\_\_ Region: \_\_\_\_\_

Name of Deceased: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Deceased was a:      \_\_\_\_\_ Pilot      \_\_\_\_\_ Family Member      \_\_\_\_\_ Anchor

Club of Deceased (if other than above): \_\_\_\_\_

Name of closest relative: \_\_\_\_\_

Address of Closest Relative: \_\_\_\_\_

\_\_\_\_\_

Offices held by deceased Pilot: \_\_\_\_\_

\_\_\_\_\_

*Please send copies of this form to:*

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Lt. Governor (for your region)