



California Pledge International Order of the Rainbow for Girls

Pledge Change in Leadership

Send to the Pledge Team Member for your Area Right Away!

Name of Pledge Group	Assembly Name
Retiring Pledge Mother	OR Retiring Assistant Pledge Mother

RECOMMENDED REPLACEMENT

PLEDGE MOTHER			
Name:	_____		
Address:	_____		
	Zip Code:	_____	
Home Phone:	_____	Cell Phone:	_____
Email:	_____		
Email is a:	_____ Preferred	_____ Not Preferred	contact method (please check or circle one)
Accepts/Sends Text Messages	_____ Yes	_____ No	
She is:	Majority	Eastern Star	Mother of a Pledge Girl Other

ASSISTANT PLEDGE MOTHER			
Name:	_____		
Address:	_____		
	Zip Code:	_____	
Home Phone:	_____	Cell Phone:	_____
Email:	_____		
Email is a:	_____ Preferred	_____ Not Preferred	contact method (please check or circle one)
Accepts/Sends Text Messages	_____ Yes	_____ No	
She is:	Majority	Eastern Star	Mother of a Pledge Girl Other

Approved by Advisory Board (Chair Signature) _____

Approved on (Date) _____