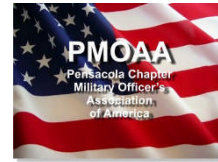




# Membership Application JOIN PMOAA NOW!



## MEMBERSHIP IN LOCAL CHAPTER CAN BE AS PRODUCTIVE AS YOUR NATIONAL MEMBERSHIP

Annual PMOAA dues \$20.00. Please make check payable to "PMOAA" and mail to:  
PMOAA, PO BOX 17728, PENSACOLA, FL 32501-7728

*(Please print the required information)*

Application Date: \_\_\_\_\_

Name: \_\_\_\_\_

Spouse: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State ZIP: \_\_\_\_\_

Phone Nos: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Business) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Rank: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

Active\*  Retired  Reserve\*  National Guard\*  Former Officer  
 Surviving Spouse

Might like to serve on a Chapter Committee

Me:  Yes  No — My Spouse:  Yes  No

I am interested in serving as a Chapter Officer or a Director:  Yes  No

National Member No: \_\_\_\_\_ Life:  Yes  No

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### **Please Order PMOAA Name tags**

*(add \$14.00, \$15.00 for Life Members, for each name tag when dues are first paid)*

Name or nick-name desired \_\_\_\_\_

Rank and Service: \_\_\_\_\_

Spouse Name or nick-name desired \_\_\_\_\_

Military Service desired on tag  Yes  No

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Amount enclosed: \$ \_\_\_\_\_

\* Free one year membership for Active Duty, National Guard, and Reserve when you join PMOAA