FORT GEORGE G. MEADE CHAPTER
MILITARY OFFICERS ASSOCIATION OF AMERICA
APPLICATION FORM FOR MEMBERSHIP / RENEWAL

Date: _____

_____I am applying as a new member in the FGGM/MOAA Chapter; **first year dues free**.

_____I am renewing my membership in the FGGM/MOAA Chapter.

I am _____ / am not _____ a member of MOAA National.

If a MOAA National member, is it a lifetime membership? Yes _____   No _____

MOAA Member Number_____
Member number may be found on magazine mailing label.

NAME: _____ **Date of Birth:** _____

Rank: _____**Service:**_____**Status:**_____
Active, Retired, Former Officer, Reserve, National Guard or Widower
MAILING ADDRESS

_____
NUMBER and STREET   Apartment Number

_____
City   State   Zip Code

Telephone Number/Residence: _____**Work:** _____

E-Mail Address_____

Spouses Name: _____

Enclosed are my dues for: (Make check payable to FGGM/MOAA)

_____ 1 Year: $12 per year (New Members, 1st year is free)

_____ 3 Years: $30 (Annotate Years :_____)

Sponsor's Name: _____
(If widower or widow please provide name of deceased spouse, rank and service)

Auxiliary member. Widow(er) of any individual who would if living, be eligible for membership to auxiliary member with full voting privilege.

Mail application to:
FGGM / MOAA
C/O Chapter Secretary
P.O. Box 743
Ft George G. Meade, MD 20755-0743

The following Board of Directors (BOD) positions are vacant. If you are interested in serving in a leadership position, please check the one(s) that are of interest. The chapter will contact you to discuss.

___2nd VP & Newsletter Editor   ___Chair of JROTC Awards   ___Secretary

___1st VP & Programs   ___Chair of Legislative Affairs   ___

For Chapter use only:

Recorded into Data Base _____**Mailing Label Prepared**_____