

**THE INDIAN RIVER CHAPTER
MILITARY OFFICERS ASSOCIATION of AMERICA
PO BOX 644047
Vero Beach FL 32964-4047
IRCMOAA.ORG**

APPLICATION FOR CHAPTER MEMBERSHIP

Date: _____

Last Name _____ First _____ Middle _____

Date of Birth (MM/DD/YY) _____ Rank _____ Service Branch _____

MEMBERSHIP QUALIFYING REQUIREMENTS

I am either on a retired list of Commissioned Officer Service ____; a former officer not on a Retired List ____; an officer on active duty, Drilling Guard or Reserve ____ . Must provide proof of military service (i.e., DD 214, US Uniformed Services Retired Identification Card).

Mailing address _____
Number Street Apartment

City State Zip Code

Summer address _____

E-mail: _____

Home phone: _____ Summer phone: _____

Spouse's Name _____

I am ____ am not ____ a member of National MOAA. My membership number is ____ .
If a member of MOAA, I am ____ am not ____ a Life Member. If not a member of National MOAA, all applicants are required to join. National MOAA phone number is 1-800-234-6622. Web site is moaa.org.

Signature _____

Annual Chapter Membership Dues are \$25. Make check payable to IRC-MOAA. Please send completed application and dues to IRC-MOAA, PO Box 644047, Vero Beach, FL 32964-4047.

Referred by: _____