

# THE LARGER OUR NUMBERS, THE GREATER YOUR REVENUE

Why MOAA chapter membership matters.



## MEMBERSHIP ENROLLMENT FORM FOR MOAA AND

Name _____	Chapter membership and dues information:
Rank _____ Branch of Service _____	_____
<input type="checkbox"/> Active <input type="checkbox"/> Retired <input type="checkbox"/> Former <input type="checkbox"/> Reserve <input type="checkbox"/> National Guard <input type="checkbox"/> Surviving Spouse	_____
Spouse name _____	_____
Address _____	_____
City _____ State _____ ZIP _____	_____
Date of birth _____ Telephone _____	_____
Email _____	_____
(To ensure deliverability of MOAA communications, please provide a personal email address.)	_____
Are you a member of MOAA? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	_____
MOAA Member Number (if known) _____	_____
<p><b>Not a MOAA national member yet? Check here to receive a BASIC Membership at no cost to you.</b> <input type="checkbox"/> <b>BASIC</b></p> <p>And, for only \$4 a month, you can upgrade to PREMIUM membership, giving you immediate access to a full spectrum of career and financial resources, exclusive publications, college scholarships for dependents, and countless discounts on products and travel. Visit <a href="http://moaa.org/join">moaa.org/join</a> to learn more.</p>	_____
How did you hear about MOAA Chapter involvement? _____	_____
Are you a member of any other MOAA Chapter(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____
If yes, which one(s)? _____	_____
<p><b>To complete enrollment:</b></p> <ul style="list-style-type: none"> <li>• Fill in this form on your computer, save it, and email it to _____ [add chapter email address/contact information] _____ as an attachment.</li> </ul> <p>Do not include credit card information. We will contact you to finalize payment if required; or</p> <ul style="list-style-type: none"> <li>• Print it out, fill it in by hand, and mail it with a check made out to _____ [add chapter payment info] _____; or</li> <li>• Go to _____ [insert chapter webpage]</li> </ul>	_____
You will be opted in to receive e-communications from MOAA and your local chapter. You will be able to opt out of any further e-communications at any time. MOAA will not sell or share personal information.	_____