



Spokane Chapter Military Officers Association Of America



Regular member: \$15/yr. or \$40 for 3 yrs.

Auxiliary (surviving spouse of deceased officer): \$9/yr. or \$25 for 3 yrs.

Please mail application to:
Spokane Chapter
P.O. Box 466
Veradale WA 99307

Please Print or Type

NAME _____ RANK _____

ADDRESS _____ ZIP _____

PHONE _____ E-MAIL _____

MOAA NAT'L NO. _____ NAME OF SPOUSE _____

SERVICE _____ STATUS (Circle One): Active Retired Former Officer Auxiliary

Date of retirement or separation (if applicable) _____ CIVILIAN OCCUPATION _____

How did you find our web site?

National MOAA _____ LOCAL CHAPTER MEMBER _____ OTHER _____

I enclose \$ _____ for Chapter dues. To join the Spokane Chapter of MOAA, membership is required in MOAA National.

Please check one that applies.

_____ I am a member of MOAA National.

_____ I have never been a member of MOAA National.

If never, I accept the one-year free trial membership in National MOAA. Open to active duty, retired, National Guard, Reserve, former commissioned officers and warrant officers of the following uniformed services: Army, Marine Corps, Navy, Air Force, Coast Guard, Public Health Service and National Oceanic and Atmospheric Administration.

Signature _____

Date _____