



MEMBERSHIP APPLICATION
Special Forces Association Chapter 82
 % Jim Ringland
 115 Spring Ave
 Holts Summit, MO 65043-4710



APPLICATION FOR MEMBERSHIP RENEWAL

I, _____ hereby apply for
 (PRINT: LAST NAME, FIRST NAME, MI) (MEMBERSHIP NUMBER)

Renewal of my membership in the Special Forces Association Chapter 82, the Ozark Chapter, and submit the following information:

PLEASE CHECK THE APPROPRIATE BOX:

____ Enclosed is a check or money order payable to: **SFA Chapter 82, The Ozark Chapter**, in the amount of \$30.00 for a one year renewal of my membership.

(Note: the annual renewal if paid before January 30 of each year is \$30.00; if paid after the 30th, there is an additional reinstatement fee of \$5.00, for a total of \$35.00.)

____ Enclosed is a check or money order payable to: **SFA Chapter 82, The Ozark Chapter**, in the amount of \$35.00 for a one year renewal of my membership which includes the reinstatement fee of \$5.00.

____ Enclosed is a check or money order payable to: **SFA Chapter 82, The Ozark Chapter**, in the amount of \$400.00 for a Lifetime Membership.

____ Enclosed is a check or money order payable to: **SFA Chapter 82, The Ozark Chapter**, in the amount of \$435.00 for a Lifetime Membership which includes a one year renewal of membership and the reinstatement fee.

Current mailing address: _____

(Please include street numbers and or P.O. Box number)

 (City and State) ZIP Code + Four

Home Phone: (____) _____ Work Phone: (____) _____

FAX: _____ E-Mail Address: _____

Date: _____ Signature: _____

FOR OFFICIAL USE ONLY

Date Received: _____ Date Sent to Treasurer: _____

Date Received: _____ Date Sent to National: _____

Date Member receives his Membership Card _____

(Member please advise one of the officers of the date you receive your card and Drop.....tnx.....

If you have questions about the application, please ask for answers.

De Oppresso Liber

