



MILITARY OFFICERS ASSOCIATION OF AMERICA - CENTRAL FLORIDA CHAPTER

Application For Membership & Information Change Form

- Enroll me as a regular member
- Enroll me as a surviving spouse member
- Address or Information Change Only
- Dues payment & Information update

LAST NAME FIRST MIDDLE RANK SPOUSE NAME

STREET ADDRESS ADD'L INFO PHONE NUMBER

CITY STATE ZIP + 4 E-MAIL ADDRESS BIRTH DATE

NAME OF DECEASED OFFICER (IF APPLICABLE) _____

Please Check Appropriate Boxes

Member of National MOAA? Yes No

If yes, Member Number _____

<u>Status</u>	<u>Service</u>	
<input type="checkbox"/> Active Duty	<input type="checkbox"/> Army	<input type="checkbox"/> Coast Guard
<input type="checkbox"/> Retired	<input type="checkbox"/> Navy	<input type="checkbox"/> USPHS
<input type="checkbox"/> Reserve	<input type="checkbox"/> Air Force	<input type="checkbox"/> NOAA
	<input type="checkbox"/> Marine Corps	

Signature: _____ Date: _____

Annual dues (payable January) are \$20 for all memberships. New members joining after June pay one-half of annual dues for the remainder of the year. Make checks payable to and mail application to: MOAA CFC, Inc., P.O. Box 141025, Orlando, FL 32814-1025. If you would like to make an additional donation to support our ROTC/JROTC scholarship program, please include it with your membership dues, or send separately. This would be greatly appreciated!