# NNCA - NNCASC
# 2017-2018 Membership Application

Paste Your Personal Address Label Here

❑Initial dues - $40.00
❑Renewal each May - $35.00
❑Reactivate lapsed membership – $35.00
❑NNCASC dues - $10.00

**NNCA member through**_____

**NNCASC member through**_____

| Last Name | First | Middle | Maiden/Military |
|---|---|---|---|
| | | | |

| Mailing Address | | City, State | Zip Code |
|---|---|---|---|
| | | | |

| Family/Friend Contact Info or Second Address | Address | City, State | Zip Code |
|---|---|---|---|
| | | | |

| Telephone | Cell Phone | Email | Birthdate (not for publication) |
|---|---|---|---|
| | | | |

**Status**

❑Active Component From: _____ (mm/dd/yyyy) To: _____ (mm/dd/yyyy)

❑Reserve Component From: _____ (mm/dd/yyyy) To: _____ (mm/dd/yyyy)

❑Retired NC Officer

❑Former NC Officer

Rank or Rank at Retirement/Discharge _____

**Volunteer Interest**

❑National ❑Board ❑Committee ❑Other
❑Chapter

**May we publish the following information in the NNCA Directory:**

Name: ❑Yes ❑No Address: ❑Yes ❑No Telephone: ❑Yes ❑No E-mail: ❑Yes ❑No

**Communication Preferences**

***Directory:*** ❑ Online ❑ Paper ***Newsletter:*** ❑Online ❑Paper

**Donations applied to**

**NNCA:** ❑ General ❑ Memorabilia ❑ History In memory of

**NNCASC:** ❑ General ❑ Scholarship _____

| | | | |
|---|---|---|---|
| **National Dues** | _____ | **Date** | _____ |
| **Chapter Dues** | _____ | **Check Number** | _____ |
| **Donation Amount** | _____ | **Total** | _____ |

****NNCA By-Laws require that Chapter members must maintain membership in NNCA**

**Renew online at NNCA.org OR make check payable NNCASC**
**c/o Georgene Waecker, 2829 Ocean Village Way, Oceanside, CA 92054-6286**