



DUAL MEMBERSHIP FORM
United States Army Warrant Officers Association

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The Quiet Professionals®

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Army Aviation Association of America (AAAA)

593 Main St, Monroe, CT 06468-2806 www.quad-a.org



AAAA Place "X" in appropriate box New Rejoin Renew Data Change

USAWOA Place "X" in appropriate box New Rejoin Renew Data Change

PURPOSE: To maintain organizational records. Used by National, Region, and Chapter Officers, Office Staff and Members (when approved) to generate mailing lists, Chapter and Region rosters, etc. Failure to furnish information may result in members not receiving the NEWSLINER, ballots, letters, membership longevity and other correspondence of importance to the membership.

MEMBERSHIP DATABASE INFORMATION - - - - - *(Press INSERT key & type between square brackets)*

SSN or Member # [_____] Rank [_____] Specialty Branch & Code [_____ / _____]
Last 5 digits of SSN requested for use in your member number. Your SSN is not released to anyone for any purpose)

First Name [_____] MI [_____] Last [_____] Suf. [_____]

Address [_____] Date Birth (MM/DD/YYYY) [_____]

City [_____] State [_____] ZIP+4 [_____] Joined Service (MM/DD/YYYY) [_____]

HOME Tel [_____] WORK Tel [_____] CELL Tel [_____]

Spouse (First Name) [_____] Highest USAWOA Office held [_____]

E-Mail Addresses [(1) _____ (2) _____]

RELEASE OF INFORMATION (Place "X" in appropriate box): DO DO NOT want the above information released if requested by other USAWOA Members and/or to be provided to the membership-benefit companies affiliated with USAWOA. (Regardless of option checked, no information is released outside of USAWOA)

CURRENT STATUS (Place "X" in appropriate box)

Active Army - ARNG* - USAR* - Retired - Former Warrant Officer - Associate (all others)
 (*AGR please check ARNG or USAR) Male Female

CERTIFICATIONS (Place "X" in appropriate box)

I HOLD / HAVE HELD a Warrant issued to me by the Secretary of the Army (If NO check Associate above)

I AM / AM NOT entitled to wear several National Defense Medals

TERM OF MEMBERSHIP (Check only one dues category please) **The NEWSLINER will be delivered electronically.** Check here if you wish a paper copy for an additional \$12 per year with your dues payment, unless you have 25+ years of membership In USAWOA or are a Life Member of USAWOA.)

INITIAL 18 MONTHS MEMBERSHIP FOR WO1s ONLY AT NO COST
 REGULAR/ASSOCIATE MEMBER DUES 1 Yr \$50 2 Yrs \$100 3 Yrs \$150 5 Yrs \$250
 RETIRED MEMBER DUES 1 Yr \$37 2 Yrs \$74 3 Yrs \$111 5 Yrs \$185

Check or Money Order for membership dues is enclosed. (Make Payable to "USAWOA")

Charge my: VISA, MC, Discover, AMEX - Credit Card# [_____]
 (No DEBIT cards, please.) CVV. Code: [_____] Expires (MM/YY) [_____ / _____]

CHAPTER AFFILIATION (Check one)

Please affiliate me with a Chapter near my home.
 Affiliate me with the [_____] Chapter
 Please **DO NOT** affiliate me with a specific Chapter

Applicant's Typed Name and Date [_____]

USAWOA/AAAA Dual Membership Form 600-1 DS (Fill-in) APRIL 2015 (All previous editions are obsolete)

THIS FORM IS TO BE USED BY THOSE WHO WISH A DUAL MEMBERSHIP IN BOTH USAWOA AND AAAA.