



## MOAA NATIONAL ENROLLMENT

YES! Sign me up as a FREE BASIC MOAA Member

Name \_\_\_\_\_

Branch of Service \_\_\_\_\_ Rank \_\_\_\_\_

- Retired       Active       Former  
 Reserve       National Guard  
 Spouse of Eligible Officer  
 Graduation Year (Cadet/Midshipmen) \_\_\_\_\_

Email Address\*\* \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

*To ensure deliverability of MOAA communications, please provide a personal email without a ".mil" domain if available. We value your privacy. MOAA does not rent or sell its members' emails to third parties. If you include your email address, you will receive e-communications from MOAA as a member benefit. Visit [www.moaa.org/email](http://www.moaa.org/email) for details.*

Date of Birth \_\_\_\_\_

Spouse Name \_\_\_\_\_

*Your spouse has access to all of your MOAA member benefits.*

\*\*Email address required for BASIC Membership



## MOAA LOCAL ALAMO CHAPTER ENROLLMENT

YES! Sign me up as a new Alamo Chapter Member  
Member of National?  Yes  No

YES! Renew my Alamo Chapter Membership

Name \_\_\_\_\_

Branch of Service \_\_\_\_\_ Rank \_\_\_\_\_

- Retired       Active       Former  
 Reserve       National Guard  
 Spouse of Eligible Officer

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_  
(Email address required for Electronic Membership)

**To ensure deliverability of Chapter communications, please provide a personal email without a ".mil" domain, if available.**

Phone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Spouse Name \_\_\_\_\_

I would like to help the Chapter as a Volunteer

- |  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> One Yr Printed newsletter       | \$25                                |
| <input type="checkbox"/> Three yrs Printed newsletter    | \$70                                |
| <input type="checkbox"/> One Yr Electronic newsletter    | \$15                                |
| <input type="checkbox"/> Three yrs Electronic newsletter | \$40                                |
| <input type="checkbox"/> Auxiliary 1 yr \$15             | <input type="checkbox"/> 3 yr \$40  |
| <input type="checkbox"/> Printed                         | <input type="checkbox"/> Electronic |

### Method of Payment

Check (please make payable to MOAA Alamo Chapter)     Visa     Discover     MasterCard     AMEX

Charge my card \$ \_\_\_\_\_

Card number \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_ CVV: \_\_\_\_\_ Signature: \_\_\_\_\_

**Send to:** MOAA-Alamo Chapter, P.O. Box 340497, Ft. Sam Houston, TX 78234; or scan/email to [moaa-ac@sbcglobal.net](mailto:moaa-ac@sbcglobal.net); or sign up **online** at [www.alamomoaa.org](http://www.alamomoaa.org).