



**MEMBERSHIP REGISTRATION FORM**

General Member: 1 Year (\$35)     General Member: 3 Years (\$90)

Rank/Rate/Title: \_\_\_\_\_

First / M.I. / Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Country: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Military Status:  ACTIVE    RESERVES    RETIRED    VETERAN    CIVILIAN

Branch of Service: \_\_\_\_\_

Current Duty Station/Company: \_\_\_\_\_ Unit/Squadron: \_\_\_\_\_

Warfare Specialty:  PILOT    NFO    AIRCREW    OTHER: \_\_\_\_\_

Aircraft Flown: \_\_\_\_\_

.....

**To pay by credit card:**

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

.....

Or, mail this form and a membership fee check made out to **Maritime Patrol Association, Inc.** to:

Maritime Patrol Association  
Attn: Membership Dept.  
P.O. Box 147  
Orange Park, FL 32067