



Lifetime MEMBERSHIP REGISTRATION FORM

Active Duty JO (ESN, LTJG, LT): \$300 Active Duty O4 and above: \$400 Retired/Reservist/Veteran: \$450 65+: \$100

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

Current Duty Station/Company: _____ Unit/Squadron: _____

Warfare Specialty: PILOT NFO AIRCREW OTHER: _____

Aircraft Flown: _____

Birthday (if applying for "65+" tier) _____

.....
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