ASSOCIATION OF QUARTERMASTERS

PLEASE CIRCLE ONE: **INITIAL** **RENEWAL** **ADDRESS CHANGE**

NAME: _____**DOB:** _____ **M OR F (CIRCLE ONE)**

RANK/GRADE: _____ **E-MAIL**:_____

COMPONENT—Circle one: ACTIVE USAR NG RETIRED CIVILIAN OTHER

MAILING ADRESS:

ADDRESS: _____

CITY: _____ **STATE**: _____ **ZIP**:_____

PHONE: ( )_____ **Specify DSN, FTS, Commercial**

TIERED/ANNUAL MEMBERSHIP (CIRCLE ONE)

		SFC-MSG	**MAJ-GEN**
	PVT-SPC	**2LT-CPT**	**CW4-CW5**
	SGT-SSG	**WO1-CW3**	**SGM-CSM**
	GS 1-7	**GS 8-12**	**GS 13-SES**
1-YR	**$12.00**	**$17.00**	**$22.00**
2-YR	**$18.00**	**$28.00**	**$38.00**
3-YR	**$25.00**	**$40.00**	**$55.00**

Discounted Rates based on age	
40-50	**$175.00**
50-60	**$150.00**
60-70	**$100.00**
Over 70	**$50.00**

Lifetime membership: $200.00____ or four annual payments of $50.00___

(**SPECIFY MENS OR LADIES WATCH**-watch will be mailed upon final payment)

CHAPTER AFFILIATION _____

PAYMENT TYPE: CASH_____ CHECK_____ MONEY ORDER_____ CREDIT CARD_____

CREDIT CARD NUMBER:_____ EXPIRATION DATE:_____

SIGNATURE_____DATE_____

ADDRESS ALL CORRESPONDENCE TO:
ASSOCIATION OF QUARTERMASTERS
P.O. BOX 5038
FORT LEE, VA 23801 **- PHONE: DSN 687-3082 COMMERCIAL (804) 734-3082 FAX: (804) 734-4375**

Form Updated 2/26/2008