



Application For Membership-Miami Valley Military Affairs Association

Name: _____

Position/Title: _____

Company/Affiliation: _____

Rank/Branch (if military): _____ Active Duty___ Retired___

Mailing Address: _____

PO Box or Street Address

City

State

Zip Code

Work Phone: _____ Home Phone: _____

Fax: _____ Cell Phone: _____

E-Mail Address: _____

Referred By (optional): _____

You may join on-line and pay by credit card, electronic check, or PayPal, for a small service fee. Just log on to <http://mvmaa2011membership.eventbrite.com> for details.

Or please make your check for \$35.00 payable to MVMAA and mail to:
MVMAA, P.O. Box 33633, Wright - Patterson AFB, Ohio 45433-0633

