# USAWOA/AAAA Dual Membership Form

**AAAA** Place "X" in appropriate box [ ] **New** [ ] **Rejoin** [ ] **Renew** [ ] **Data Change**

**USAWOA** Place "X" in appropriate box [ ] **New** [ ] **Rejoin** [ ] **Renew** [ ] **Data Change**

**PURPOSE: To maintain organizational records. Used by National, Region, and Chapter Officers, Office Staff and Members (when approved) to generate mailing lists, Chapter and Region rosters, etc. Failure to furnish information may result in members not receiving the NEWSLINER, ballots, letters, membership longevity and other correspondence of importance to the membership.**

## MEMBERSHIP DATABASE INFORMATION

**Last 5 digits of SSN or Member #** [ ]  **Rank** [ ] **Specialty Branch & Code** [ ]

**First Name** [ ]  **MI** [ ]  **Last** [ ]  **Suf.** [ ]

**Address** [ ] **Date Birth** *(MM/DD/YYYY)* [ ]

**City** [ ] **State** [ ] **ZIP+4** [ ] **Joined Service** *(MM/DD/YYYY)* [ ]

**Home Phone** [ ] **Cell Phone** [ ]

**Spouse** *(First Name)* [ ] **Highest USAWOA Office held** [ ]

**E-Mail Addresses** [(1) (2) ]

**RELEASE OF INFORMATION** *(Place "X" in appropriate box)*: **[ ] DO [ ] DO NOT** want the above information released if requested by other USAWOA Members

**[\_\_\_] OPT OUT Of AUSA Free Membership Benefit**

**CURRENT STATUS** *(Place "X" in appropriate box)*

[ ] Active Army - [ ] ARNG\* - [ ] USAR\* - [ ] Retired - [ ] Former Warrant Officer - [ ] Associate

*(\*AGR please check ARNG or USAR) (all others)*

[ ] Male [ ] Female

**CERTIFICATIONS** *(Place "X" in appropriate box)*

(If NO, check Associate above)

**I [ ] HOLD / [ ] HAVE HELD** a Warrant issued to me by the Secretary of the Army

**I [ ] AM / [ ] AM NOT** entitled to wear several National Defense Medals

**TERM OF MEMBERSHIP** *(Check only one dues category please)*

***The NEWSLINER will be delivered electronically.***

***[\_\_] Check here if you wish a paper copy for an additional $12 per year with your dues payment, unless you have 25+ years of membership In USAWOA)***

**[\_\_]** INITIAL18 MONTHS MEMBERSHIP FOR WO1s ONLY AT NO COST

[ ] REGULAR/ASSOCIATE MEMBER DUES [ ] 1 Yr $50 [ ] 2 Yrs $100 [ ] 3 Yrs $150 [ ] 5 Yrs $250

[ ] RETIRED MEMBER DUES [ ] 1 Yr $37 [ ] 2 Yrs $74 [ ] 3 Yrs $111 [ ] 5 Yrs $185

[ ] Check or Money Order for membership dues is enclosed. (**Make Payable to “USAWOA”**)

[ ]Charge my: [ ] VISA, [ ] MC, [ ] Discover, [ ] AMEX - Credit Card# [ ]

*(No DEBIT cards, please.)* CVV. Code*:* [ ] Expires (MM/YY) [ \_\_ /\_\_ ]

**CHAPTER AFFILIATION** *(Check one)*

[ ] Please affiliate me with a Chapter near my home.

[ ] Affiliate me with the [ ] Chapter

[ ] Please **DO NOT** affiliate me with a specific Chapter

***Applicant's Signature and Date*** [ ]

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**THIS FORM IS TO BE USED BY THOSE WHO WISH A DUAL MEMBERSHIP IN BOTH USAWOA AND AAAA.**