



**Aiken Chapter  
Military Officers Association of America (MOAA)  
262 Eastgate Drive #239  
Aiken, South Carolina 29803**

## **APPLICATION FOR MEMBERSHIP**

### **ELIGIBILITY:**

- A) Men and women who are, or have been, commissioned, warrant, or non-commissioned officer in any component of the U.S. Army, Navy, Air Force, Space Force, Marine Corps, Coast Guard, National Oceanic and Atmospheric Administration, and Public Health Service.
- B) Men and Women of the eight U.S. uniformed services must have been discharged under honorable conditions.
- C) Widows and widowers of eligible, as noted above, whether or not their spouses were members of MOAA prior to their death.

Name \_\_\_\_\_ Rank \_\_\_\_\_ Branch \_\_\_\_\_

Address \_\_\_\_\_

Nickname, if any \_\_\_\_\_ Month & Year of Birth \_\_\_\_\_

National Membership Number (if applicable) \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Home phone \_\_\_\_\_

Business # \_\_\_\_\_ E-mail address \_\_\_\_\_

Active Service From \_\_\_\_\_ to \_\_\_\_\_

Reserve service from \_\_\_\_\_ to \_\_\_\_\_ Branch (if different from active) \_\_\_\_\_

Present Employment (if any) \_\_\_\_\_

(If retired) Prior Employment or Occupation \_\_\_\_\_

Residence prior to Aiken \_\_\_\_\_

Other data or comments (use other side if more space is needed)

**I hereby apply for membership in the Aiken Chapter of the Military Officers Association of America (MOAA)**

Signature \_\_\_\_\_ Date \_\_\_\_\_ Sponsor \_\_\_\_\_

Chapter dues are \$25.00 per calendar year (\$12.50 if joining after 30 June). Please forward this application with a check in the appropriate amount payable to "Aiken Chapter MOAA," to:

**Secretary  
Aiken Chapter, MOAA  
262 Eastgate Drive, #239  
Aiken, SC 29803**