



Corporate Membership Application

Association of the United States Army
P.O. Box 101560 • Arlington, VA 22210-0860

| | | |
|----------------------------------|------------|-----------------------------------------------------------------------------|
| FIRM NAME | | |
| STREET | | |
| CITY | STATE | ZIP + 4 CODE |
| TELEPHONE NUMBER | FAX NUMBER | |
| E-MAIL | CHAPTER | MEMBERSHIP <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL |
| NAME OF FIRM'S PRINCIPAL CONTACT | POSITION | |

The principal contact will automatically be listed as a designee unless otherwise noted. If the principal contact is not to be a designee then please check here.

We wish to donate all undesignated memberships to the local chapter.

| | |
|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| CHARGE APPLICANT'S <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMEX | <input type="checkbox"/> CHECK OR MONEY ORDER |
| ACCOUNT NO. | EXP. DATE |
| SIGNATURE | AMOUNT |

DUES

- \$150 1 Year 2 Designee Members
- \$405 3 Year 2 Designee Members
- \$315 1 Year 5 Designee Members
- \$855 3 Year 5 Designee Members
- \$585 1 Year 10 Designee Members
- \$1500 3 Year 10 Designee Members

Dues include \$16.50 a year per designee member for a subscription to *ARMY Magazine* and \$14.00 a year per designee for a subscription to *AUSA News*.

Dues and foreign postage must be paid in U.S. funds. Foreign Postage, add \$15 for each designee per year.

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|-----------------------------|------------------|
| FOR AUSA HQ USE ONLY | |
| CHAPTER NO: | CAD CODE: |

DESIGNEE MEMBERS Use another sheet if necessary.

| | | | | |
|--------------------------------------------------------------------------------------------------|------------|--------------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| RANK/TITLE | FIRST NAME | INIT. | LAST NAME | PIN NUMBER (TO ACCESS YOUR RECORD ONLINE) 4 DIGITS |
| MAILING ADDRESS | | | | CHAPTER MO./YR. OF BIRTH |
| CITY | STATE | ZIP + 4 CODE | | CHECK CURRENT STATUS <input type="checkbox"/> Active Component <input type="checkbox"/> National Guard <input type="checkbox"/> Army Reserve <input type="checkbox"/> Retired Army <input type="checkbox"/> Veteran <input type="checkbox"/> Civilian |
| CHECK HERE FOR A FAMILY MEMBER BENEFIT I.D. CARD <input type="checkbox"/> Yes – Name for card | | | | E-MAIL |
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