



COAST GUARD AVIATION ASSOCIATION APPLICATION FOR MEMBERSHIP

Name: _____ rank/rate: _____

Address: _____

City: _____ State: _____ Zip: _____

The following will be listed in the CGAA Directory. DO NOT include if you do not want them published. Check if spouse/partner is not to be listed.

Spouse/partner: _____

Email(s): _____ Phone #(s) _____

Please check all the following that apply :

CG current active

CG Aviator

CG Retired

Designation # : _____ Date: _____

CG Reserve

Helo# : _____ Date: _____

Former CG

CG Aircrew

CG Auxiliary

CG Rescue Swimmer

CG Aviation supporter

RS# : _____

(all are welcome!)

Flight Surgeon

Exchange Pilot Service

Sign me up for:

Life Membership: \$275 (or 5 annual payments of \$60)

Annual membership: Retired, Veteran, Auxiliarists, Friend of CGAA: \$40 per year

Active Duty: \$20 per year

You can also join the CGAA on line at: AOPTERO.ORG Mail form and a check to:

CG Aviation Association

P. O. Box 940 Troy, VA 22974