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 Retired
☐ CG Reserve
☐ Former CG
☐ CG Auxiliary
☐ CG Aviation supporter
(all are welcome!)

☐ CG Aviator
Designation # : _____ Date: _____
Helo# : _____ Date: _____
☐ CG Aircrew
☐ CG Rescue Swimmer
RS# : _____
☐ 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
c/o Watts Group
4161 Chain Bridge Road
Fairfax, VA 22030