



Central Virginia Chapter
Military Officers Association of America

Membership Application

Membership in CVC/MOAA is open to all current and former officers of the U.S. Armed Services, the U.S. Coast Guard, the National Oceanic and Atmospheric Association, and the U.S. Public Health Service. Auxiliary membership is open to surviving spouses of former officers.

Name: _____ Date: _____

Name or nickname: _____ (for badge)

Spouse's name: _____

Rank: _____ Service: _____

Address: _____

Birthdate: _____

Telephone number: _____ Email: _____

Service Status: Active Duty ___ Reserve ___ Retired ___ Former Officer ___
National Guard ___ Air National Guard ___ Auxiliary ___

Annual Dues: Regular members - \$40. Include check payable to CVC/MOAA.

If you are a member of MOAA national, please provide membership number: _____

If not, may we enroll you (recommended - not required, free for 1st year)? Yes ___ No ___

Biographical sketch: (complete form on reverse)

Please mail the completed application to: Central Virginia Chapter/MOAA
PO Box 6455
Charlottesville, VA 22906-6455

Biographical Sketch

For use in The Bugle (CVC newsletter) and other informational purposes. Please don't include information you view as sensitive.

Education: _____

Military Career: (significant duty stations, job titles/duties, specialized training/education):

Post Military Career/Service: _____

What brought you to this area? _____

Family: _____
