

**281st ASSAULT HELICOPTER COMPANY ASSOCIATION, INC.
MEMBERSHIP APPLICATION FORM**

(Check one) Information Change Only New Application Renewal Member # _____

Send To:

J. Fred Beck, Membership Chairman
281st AHC Association, Inc.
205 Carey Court
Neenah, WI 54956
Tel: 920-558-4127 E-mail: jfb281st@outlook.com

For the year of: _____

***ANNUAL DUES: \$25**

ASSOCIATE MEMBERSHIP: \$25

****LIFE MEMBERSHIP: \$300**

CORPORATE MEMBERSHIP: \$500

HONORARY MEMBERSHIP: \$0

NAME: _____ DOB (dd/mm/yy): _____

SPOUSE (Co-Pilot): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____

E-MAIL ADDRESS: _____ (For 281st AHC Assn. commo)

Information about your tour(s) with the 281st Assault Helicopter Company, and/or all attached/supporting unit(s):

(From) **DATES** (To) **PLT/DUTY ASSIGNMENT** **LOCATION** **CALL SIGN/TAIL#**

(MM/YY) (MM/YY)

(MM/YY) (MM/YY)

Information about **YOU**: (i.e., additional tours, aviation/military career, medals/awards, hobbies, family, website, etc.)

"I (do) (do not) grant the 281st AHC Assn. permission to list the information provided herein in its **Member Directory**."

Signature: _____ DATE: _____

Print this form, fill it out, include payment for dues and send by US MAIL to the address above. (NOTE: Make check/money order payable to "281st AHC Association, Inc.")

Date Received: _____ **Roster Posted:** _____

NOTE: *Annual Membership: Dues are \$25.00 and are due and payable on 1 Jan each year. Dues not paid by 31 Jan of the new year, become delinquent.

****Life Membership dues may be paid in one payment or over a period of one year in no more than six payments. These payments, including the down payment, must be initiated and completed within the timeframe of a membership year 1 Jan – 31 Dec.**

Form Revised: 01-14-2015