



# The VX/VXE-6 Association

## Application for Membership

<b>First Name</b>	
<b>Last Name</b>	
<b>Street Address</b>	
<b>City, State, Zip</b>	
<b>Phone</b>	
<b>Email Address</b>	
<b>Home State</b>	
<b>Check one</b>	<input type="checkbox"/> Member <input type="checkbox"/> Spouse
<b>In which years did you serve in VX/VXE-6</b>	<b>Year From:</b> _____ <b>Year To:</b> _____
<b>RANK/RATE when you left command</b>	
<b>Are you interested in attending the First Official VX-VXE-6 Reunion in 2013?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Membership Fee:</b> 1 Year (\$10) or 3 Years (\$25)	<b>Enter total amount you are sending: \$</b>
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