

USA Membership Renewal Form



Please complete this new member/renewal form and send along with your payment to:

| | oomis, 359 Bittlewo 856-767-4582 • | | 그리고 있죠 그네 | PLEASE NOTE: NEW NAME AND ADDRESS |
|---|--|--|--|--------------------------------------|
| I wish to □ JOIN □ RENEW □ FULL MEMBER | Membership LIFETIME MEMB (MUST BE 70 YEARS OF AGE | ER-USA AS | SSOCIATE MEMBER | □ WIDOW |
| I served at Burtonwood from | to | | (UNIT) | |
| Association. This entitles you to 4 is receive their magazine by electron | ic transmission only. To | imes mailed to you accept this option | ar home. Annual dues are s list your email address. | \$25.00 for those that wil |
| ☐ I would like the <u>electronic version</u> | on only. My email addres | S 1S: | | |
| ☐ Check here if you have recently moved. Current Address: | | (Please complete if you have recently moved:) Previous Address: | | |
| Name | | | | |
| Address | | | | |
| Zip Code Tele | | | Telep | |
| First Name of Spouse | | | | |
| ADD | RESS CHANGE FO | RM (USA ME | MBERS ONLY) | |
| If you have recently moved | and live in the USA, | please complet | e and mail this addres | s change form to: |
| | oomis, 359 Bittlewo 856-767-4582 • | | 상이가 연구의 크림프로일 Y : | PLEASE NOTE: NEW NAME AND ADDRESS |
| PREVIOUS ADDRESS: | | NEW ADDRESS: | | |
| NAME | | NAME | | |
| ADDRESS | | ADDRESS | | |
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