## Special Forces Association PO Box 41436 Fayetteville, NC 28309

## Membership Renewal Form (Not for use by new members)

Dues pay period is from 1 October through 31 January. Any annual members who have not paid their dues by the grace period will be placed in an Inactive roster and will be removed from the mailing list.

I(Print Last Name, First Name, MI)	(Membership Number) hereby app	bly for renewal	of my	
membership in Chapter of the Speci		following infor	mation:	
CHECK ONE OF THE FOLLOWING BO	XES:			
Annual Dues. Enclosed is a check or n Annual renewal is \$40.00 if paid before 30	5	r renewal of n	ny membership.	Note:
<b>Reinstatement.</b> Enclosed is a check or m the \$40.00 annual renewal fee. Note: annu	•			g with
Life Membership. Enclosed is a check of to members in good standing only.	r money order <b>\$440.00</b> for a lifetime	membership. T	The \$440.00 fee a	pplies
<b>Reinstatement &amp; Life Membership</b> . E membership of which \$440.00 is the life n				
Life Membership (65 and over). Date of a lifetime membership. The \$320.00 fee a	<b>f Birth</b> Enclosed is a pplies to members in good standing or	check or mone nly.	y order for \$320.	<b>00</b> for
Reinstatement & Life Membership (65 order for \$345.00 for reinstatement and a for annual dues and \$5.00 is for reinstatem	lifetime membership of which \$320.0			
Current mailing address:	City	State	Zip+4	
Home Telephone: ()			•	
Email Address:				
Date of Birth:	Retired Rank/Rank at Sepera	tion:		