

Circle Either

# Membership Application

Visit our web site at <http://www.ngbaa.com>

New or Renewal

## NATIONAL GUARD BUREAU ALUMNI ASSOCIATION

Post Office Box 4294  
Falls Church, VA 22044-4294

NAME \_\_\_\_\_ RANK/TITLE \_\_\_\_\_ PREFERRED NICKNAME \_\_\_\_\_  
(First name, Middle Initial, Last Name and suffix, if any) (Not pay grade) (Or call sign)

HOME ADDRESS \_\_\_\_\_  
(Street, Apartment Number, City, State, ZIP Code)

CURRENT EMPLOYER OR NGB ASSIGNMENT/OFFICE \_\_\_\_\_

CURRENT OR LAST NGB ASSIGNMENT \_\_\_\_\_  
(Office) From (month and year) To (month and year)

E-Mail address at which you want to receive NGBAA email \_\_\_\_\_ Birthday (month and day) \_\_\_\_\_

TELEPHONE: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

I DO \_\_\_ I DO NOT \_\_\_ authorize distribution of the above address, telephone numbers, and email addresses to members of the Alumni Association for non-commercial networking purposes.

I DO \_\_\_ I DO NOT \_\_\_ want to post my membership status on the NGBAA website.

I DO \_\_\_ I DO NOT \_\_\_ want to enroll for and receive emails and information about the Consultants' and Contractors' Breakfasts and share my professional contact info with others on the list.

If you change your address or other information, or want to correspond with us, send an email to [ngbaa1@gmail.com](mailto:ngbaa1@gmail.com) or write to us at the address above.

### BELOW FOR COMPLETION BY MEMBERSHIP COMMITTEE

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\_\_\_\_ \$20 (Senior Grades and Associates) Cash \_\_\_\_\_ Check \_\_\_\_\_ \_\_\_\_\_ Member \_\_\_\_\_ Associate member

\_\_\_\_ \$15 (E7 and below; GS7 and below) Cash \_\_\_\_\_ Check \_\_\_\_\_ \_\_\_\_\_ Member \_\_\_\_\_ Associate member

\_\_\_\_ \$300 (Life) Cash \_\_\_\_\_ Check \_\_\_\_\_

Date Dues Paid \_\_\_\_\_ Rec'd By \_\_\_\_\_ for Membership year **201**\_\_

The membership year is 1 January through 31 December with credit for early payment on or after 1 October.