

## 1<sup>st</sup> Fighter Association Membership Form

1. Fill in your current information (this information is used solely for the purpose of 1<sup>st</sup> Fighter Association business and it will not be shared with any outside agency).
2. Check the applicable membership level you wish to maintain.
3. Make your check payable to **1<sup>st</sup> Fighter Association** for the contribution amount of the membership level you elected.
4. Mail your check and this form to:

1<sup>st</sup> Fighter Association  
Attn: Pete Marty, Secretary/Treasurer  
504 Southgate Dr.  
Blacksburg, VA 24060-5437

Name \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Address \_\_\_\_\_ Dates of Service: From \_\_\_\_\_  
Year/Month

City, State, ZIP \_\_\_\_\_ To \_\_\_\_\_  
Year/Month

Phone \_\_\_\_\_ E-Mail\* \_\_\_\_\_

Unit/Sqd \_\_\_\_\_ Duties \_\_\_\_\_

\*Enter either your personal e-mail address or that of a relative or friend for which you have access

| Membership Level                       | Categories      | Contribution | √ |
|--|-----------------|--------------|---|
| Charter (WWII Members)                 | Annual Dues     | \$20         |   |
|  | Life Membership | \$100        |   |
| Service (Post WWII Members)            | Annual Dues     | \$20         |   |
|  | Life Membership | \$250        |   |
| 1 <sup>st</sup> FW Active Duty         | Annual Dues     | \$10         |   |
|  | Life Membership | \$250        |   |
| Honorary (Spouses of Deceased Members) | Annual Dues     | \$10         |   |
|  | Life Membership | **           |   |
| Friend                                 | Annual Dues     | \$20         |   |
|  | Life Membership | \$250        |   |

\*\* Spouses of Deceased Life Members are grandfathered.