



**APPLICATION FOR MEMBERSHIP IN THE
MOAA SURVIVING SPOUSE VIRTUAL CHAPTER**

Yes! I would like to be part of this exciting new venture! Please accept my application below. I understand I must meet two criteria and certify I am both a member of national MOAA *and* (a) a surviving spouse of a uniformed services member (CWO and above), *or* (b) the spouse of a uniformed services member of MOAA and currently serving as a surviving spouse liaison, *or* (c) a uniformed service member currently serving as a surviving spouse liaison.

a b c (Please check applicable criteria.)

NAME (LAST, FIRST & MIDDLE):

MOAA#: **IF NOT A MOAA MEMBER, JOIN ONLINE AT MOAA.ORG/JOIN**

HOW LONG HAVE YOU BEEN A SURVIVING SPOUSE? DOB (dd/mm/yyyy):

SPOUSE'S NAME (IF APPLICABLE): RANK (if applicable):

SERVICE (SPOUSE): ARMY AIR FORCE MARINE CORPS NAVY COAST GUARD NOAA
 PUBLIC HEALTH SERVICE

EMAIL ADDRESS: BEST PHONE #:

MAILING ADDRESS:

IF YOU ARE A SPOUSE/ MILITARY MEMBER, HOW LONG HAVE YOU BEEN CONNECTED TO THE MILITARY? YEARS ACTIVE DUTY YEARS RETIRED

I HAVE A FACEBOOK ACCOUNT, AND I AM COMFORTABLE WORKING ON FACEBOOK:
 YES NO

You can either:

a. Complete this form on your computer, save it, and then email it as an attachment to mssvc02@gmail.com, or

b. Print out the form, fill it in by hand, and mail to 5808 Pebble Beach Dr., Granbury, TX 76049

Please email or call any of the names listed below with questions you might have. Thanks for joining us! You will hear from us shortly with information about our first meeting!

Gail Joyce

Micki Costello

MOAA Councils & Chapters

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214-676-2132

214-770-4140

800-234-6622