



AIR FORCE SECURITY FORCES ASSOCIATION

P.O. Box 683, Helotes, TX 78023-9998
(888) 250-9876 (210) 277-0448

www.afsfaonline.com



AFSFA Member Application/Renewal Form

☐ New member

☐ Renewal

Please Check One

☐ Active

☐ Retired

☐ Reserve

☐ ANG

☐ Civilian

☐ Veteran

**** NOTE: ITEMS WITH AN ASTERISK ARE REQUIRED ITEMS ****

* NAME: _____

Rank (Active or Ret) _____

Spouse's Name: _____

* ADDRESS _____

* CITY _____ * State _____ * Zip _____

* PHONE {H}() _____ * {W}() _____ * {C}() _____

* Email Address _____

☐ Check here if personal information has changed

AFSFA Web Access User Name: _____ Password: _____

Please provide a User Name and Password for online access. User Names and Password must be at least 6 characters

* New members, please check **ONLY ONE** of the following statements (whichever is applicable)

☐ **REGULAR MEMBERSHIP (Voting):** I certify that I have served or am serving honorably as a military or civilian member of the US Air Force or its predecessor service arms, i.e., Provost Marshal, etc., in the security or law enforcement career field.

☐ **ASSOCIATE MEMBERSHIP (Non-Voting):** I certify that I have served or am serving honorably in the military (other than the AF) or in law enforcement or the security profession.

MEMBERSHIP TYPE:

(Includes quarterly AFSFA Magazine, plus access to the entire website and forum)

* Full Membership: ☐ One Year - \$45 ☐ Five Year - \$200

* Life Membership ☐ 21 – 30 yrs - \$1,200 ☐ 31 – 40 yrs - \$975 ☐ 41-50 yrs - \$750

☐ 51 – 60 yrs - \$525 ☐ 61 yrs up - \$300

Magazine Choice

☐ Print Edition

☐ Digital

METHOD OF PAYMENT:

☐ CHECK

☐ CREDIT CARD (Discover, Visa, MasterCard or American Express)

Credit Card Number _____ Exp Date _____

Signature _____ Date _____

TAX-DEDUCTIBLE CONTRIBUTION

In addition to my dues, I would like to make a tax-deductible donation of \$_____ to the Air Force Security Forces Association.