MOAA www.moaastpetearea.com	CHAPTER / SURVIVING SPOUSE MEMBERSHIP APPLICATION St. Petersburg Area Chapter MOAA (New, Renewal or Lifetime)		
		nformation for the qualifying MOAA member spous	se)
Name (Last, First, MI):		Rank:	
		Nickname:	
Address:			
Phone (Primary):	Mobile:	DOB:	
Email:			
MOAA #:	_ National MOAA Life Memb	er? Y N	
Spouse (Last, First, MI):			
Spouse Nickname:	Spouse DOB:	Surviving Spouse? Y N	
Snowbird Address:			
		Snowbird Months:	
Payment (circle all that apply):			
CHAPTER Membership (MOAA Me Annual: \$30	mber):		
Lifetime Membership: 55 y/o or les	s: \$425 56-70: \$375	71+: \$300	
SPOUSE Membership (OPTIONAL Annual: \$30) / SURVIVING SPOUSE:		
Lifetime Membership: 55 y/o or les	s: \$425 56-70: \$375	71+: \$300	
Add one time charge of \$10.00 per Please make membership check pa Provide form and payment to Chap	ayable to: SPA-MOAA Amo	unt enclosed: PO Box 8462, Seminole FL 33775-8462	

MOAA Membership is open to Active Duty, Former, Retired, National Guard and Reserve, Commissioned and Warrant Officers of the Uniformed Services and their Surviving Spouses. All chapter members must be members of MOAA (national). If not a national member please call1-800-234-6622 or visit MOAA.org to join (link is also on our website). Note: By joining, you authorize the use of your image in official MOAA publications. MOAA is an independent, non-profit, politically nonpartisan organization.