MILITARY OFFICERS ASSOCIATION OF AMERICA

Green Valley Chapter



Military Officers Association of America Green Valley, Arizona Chapter PO Box 1535 · Green Valley, AZ 85622-1535

2026 Chapter Membership/Renew Dues

| Chapter Dues: (Military-\$25; Spouses-\$15) | |
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| Membership Dues \$ Make check payable to: Military Off MOAA. | ficers Association of Green Valley or GV |
| PLEASE PROVIDE THE INFORMATION BELOW: | |
| Name: | _New Renewal |
| Rank: Branch of Service:(Status) | National # |
| Spouse/Partner | <u> </u> |
| Address: | |
| City, State, Zip | |
| DOB (Month/Day/Year) | |
| Phone: E-Mail: | |
| | |
| Scholarship & Military Assistance Fund \$ | Donation. |
| Please write a separate check payable to: Green Valley MOAA Scho GV MOAA S&MA Fund. | larship and Military Assistance Fund or |
| Dues may be paid at any meeting or mailed to Military Officers A Arizona Chapter, P.O. Box 1535, Green Valley, AZ 85622-1535. | Association of America, Green Valley, |

SEE REVERSE SIDE (next page)

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| Congratulations on becoming a member of the second oldest of the nine MOAA Arizona Chapters. The MOAA is recognized as the most respected and influential professional military association in America. The Vision Statement "NEVER STOP SERVING" provides a focus for the entire MOAA organization. | |
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| To help us better understand how you would prefer to contribute to our Chapter, please complete the following questions. | |
| Previous work and/or volunteer experience | |
| Description of training, leadership and knowledge that may be pertinent | |
| | |
| PLACE A CHECK NEXT TO YOUR DESIRED CHAPTER AREAS OF PARTICIPATION: | |
| Fundraising or Assistant | |
| Public Relations or Assistant | |
| Scheduling & managing Chapter events or Assistant | |
| Grant writing or Assistant | |
| Chapter secretary or assistant | |
| Chapter Treasurer or assistant | |
| Community Partner Programs committee member | |
| Historian | |
| Chapter Liaison to military units | |
| Chapter Liaison to JROTC units | |
| Chapter Liaison to Green Valley Chamber of Commerce or Assistant | |
| RETURN THIS NEW MEMBER QUESTIONNAIRE WITH YOUR CHAPTER APPLICATION/RENEWAL FORM. | |
| Welcome Aboard | |