

## C\*W\*A\*R\*T



				Applicant	t Information				
ST me			F	First		Initial:	Spouse/Companion:		
Mailing address			c	City:		State:		Zip:	
Home		Cell	- 1		Fare				
ohone: <b>(</b> ) —		phone: (	)	<del>-</del> -	Email address:				
	)(19) Not-	for-profit V	eteran	s Organization	and required t		017	mation on each member	
Branch of service:						Year entered service		Year service ended	
				Name I	Badge Info	***			
others to know about you, e.g., city, state or branch of service or chapter  Note: A member badge comes with the New Member Packet, and your c  Member Spouse/Cor  First & last:					and your co-me	co-member's badge may be purchased for \$7.50.			
tember econd line:					Spouse/Companion second line:				
				Membe	rship Fees				
Member					His/her name:		His/her SMART#		
				ged from US M /SEATO memi		or as a	commissioned or	ficer of NOAA or USPHS;	
Also check all that apply								☐ NATO/SEATO ☐ USPHS	
Annual dues: \$65 (ACTIVE DUTY—\$0) plus one time \$15 new member packet							t		
Spouse/Companion	É								
☐ With privileges of	members	hip for spou	se \$30	): (Spouse/0	Companion /Fa	mily Me	mber/Widow/Wid	ower)	
Also check all that to the Spot			₹V 🗆			red 501(	c)(19) not-for-pro	T member who no longer offt information below or service ended:	
Your Spouse or Companion may want to join with you to have Natio voting rights, the ability to hold the position of Regional director, as became eligible to win door prize drawings.						Spouse/Comp \$30		30.0	
						His/her badge \$7.5		7.5	
						Total Enclosed			
	"I certi	fy with hon	or tha	t the informa	tion I have pro	vided is	s true and corre	ct."	
Applicant signature:							Date		



	Fees Payable to: SMA Phone: 800-354-7681	RT <b>Mail to:</b> SMART, 114 Du Email: smart@smartrving.or	xbury Ave. Molino, FL 32577 rg Web: www.smartrving.org
Application mailed on:		Check#:	Amount:
My SMART co	ontact	į	From:
Contact phone	· # ( ) —	Contact email:	
Annroved: 4 &	PR 2016: Previous versions are obse	lete and should be discarded	