Krulak Marine Alliance of Alabama

Membership Application PRINT ALL INFORMATION

I,, do hereby confirm that the following information is true, and that
completely understand the Krulak Marine Alliance of Alabama's Vision and Mission, and without any
reservation give my word in full agreement to accept, embrace, and preserve in perpetuity, and shall conduct
myself honorably and professionally at all times to those ends, and never bring disgrace or injury in any form
the Krulak Marine Alliance of Alabama's members, this I affirm on my word in applying for membership.
SPONSOR Marine Advocate: Name: Date:/
PERSONAL / CORPORATION Information:
1. Name:
2. Address:
3. City: Date of Birth://
4. State: Alabama Other:
5. Zip Code:
6. Telephone Number: AC://
7. E-Mail Address:
8. Corporate Name:
MILITARY Service: □ Army □ Marine Corps □ Navy □ Air Force □ Coast Guard □ Merchant Marine
□ I didn't service in the Nation's Armed Forces.
VETTING Approval:
$\ \square N/A \ \square DD214 \ \square VA\text{-ID} \square Military\text{-ID} \square Discharge Certificate \square Honorably Discharged$
DUES <i>Individual-Corporate:</i> □ Individual: □\$20 □\$15 □\$10 □\$5 □\$25 (This and next year's dues)
□ Cash □ Check - # □ Credit Card - last four digits
□ Corporation: □ \$200 □ Life - \$500 □ Check - # □ Credit Card - last four digits
APPLICANT'S SIGNATURE: (Sign in presence of KMAA officer
<u>NOTE:</u> Online Payment Option can be accessed at www.KrulakMarines.org
APPROVAL <i>Processed:</i> □ Database □ Membership #
Secretary: Date: / /