

Mariner/Marlin Association



MEMBERSHIP ENROLLMENT FORM

Date: _____

Name: _____
Last Name First Name MI

Spouse: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ - _____ E-Mail Address: _____

Crew Position: (pilot/aircrew/other): _____

Squadron(s) or Other Affiliation (include dates)

Comments:

Initial enrollment dues are \$35.00.

E-mailed Newsletters

\$25.00 Annual Renewal

Hard Copy Newsletters

\$30.00 Annual Renewal

* Return completed enrollment form with payment to:

Mariner/Marlin Association
Donald Zickefoose, Membership Chairman
PO Box 572
Vermilion, OH 44089