



**700 (City of Edmonton) Wing  
Royal Canadian Air Force Association  
11410 Kingsway, Edmonton, Alberta T5G 0X4**

**MEMBERSHIP APPLICATION FORM**

PLEASE PRINT CLEARLY

Date: \_\_\_\_\_

Regular: \_\_\_\_\_ Dual: \_\_\_\_\_

Sponsoring Member Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Surname / Given Name / include Rank if applicable (current or retired)

(Dual) Applicant Name: \_\_\_\_\_

Surname / Given Name / include Rank if applicable (current or retired)

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (Dual) Date of Birth: \_\_\_\_\_

Former Wing Member? Wing # \_\_\_\_\_ Year \_\_\_\_\_ MAL? \_\_\_\_\_ Legion/Branch Name: \_\_\_\_\_

Former Military Services; RCMP, Air Cadets:

Component: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

Medals / Decorations: \_\_\_\_\_

I certify that the information provided is correct and I/we agree to abide by the Constitution, Rules, and Bylaws of 700 (City of Edmonton) Wing, Royal Canadian Air Force Association. Signing this application form provides your consent allowing 700 Wing to share your contact information ONLY with other Association members and ONLY for the purpose of conducting Association business.

Applicant Signature: \_\_\_\_\_

Dual Applicant Signature: \_\_\_\_\_

Interest Survey: Please take a minute and circle/check ✓ which activities you may be interested in, i.e.:

Lunches / Dinners / Board or Card Games / Dances / Day Trips / Pool or Snooker / Golf / Committee Help

Other (Please specify): \_\_\_\_\_

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For Office Use only

Date Received: \_\_\_\_\_

Fees: \$ \_\_\_\_\_ ( Cash / Cheque / e-Transfer) Accepted by \_\_\_\_\_

Regular - \$35.00 Dual (Couple) - \$50.00

For more information contact the Membership Chair, Sylvia Loewen at (780) 473-2406 or

[700WingRCAFA@gmail.com](mailto:700WingRCAFA@gmail.com)