



USS America Carrier Veterans Association, Inc.
New Member Application

The space below is provided for your contact information:

First Name:

Middle Initial:

Last Name:

Address:

City:

State:

Zip:

Country:

Home Phone:

Fax:

Email:

Are you a Plankowner of the USS America (yes or no)? _____

What Department and Division were you in aboard USS America? _____

What is/was your Rank and Rate? _____

What years did you serve aboard USS America? (i.e. 1964-1996) _____

Would you like your email address posted along with your name in the Membership Log? (yes or no)

CVA Membership Type and Member Rates:

Please circle one:	Regular Or Associate*	Lifetime Age 49 and below	Lifetime Age 50-61	Lifetime Age 62 and over.
	\$25*	\$250	\$150	\$100

*Per 12 month period based on your join date, Regular and Associate member renewal rate at \$25 due upon membership expiration.

1. Total Dues Amount: _____ \$

TOTAL AMOUNT ENCLOSED (check or money order only) _____ \$

Please make check/money order out to "USS America Carrier CVA, INC." and mail to:

USS America Carrier CVA, INC.
328 E. 239th Street Bronx
New York, NY 10470
1-888-391-CV66 (2866)