



Maxwell-Gunter Spouses' Club

Membership Application

Please print only the information you would like to be listed in the MGSC directory!

First Name: _____ Last Name: _____

Address: _____ City/State/Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email: _____ Birthday: _____

I am a: ___ New Member ___ Returning Member Status: ___ Permanent Party ___ Student Spouse

Spouse's Name _____ Rank: _____ Unit: _____

I am interested in the following opportunities:

___ Board Position ___ Holiday Mini-Market ___ Silent Auction ___ Thrift Shop ___ Charitable Committee ___ Scholarship

Annual Membership Dues (Check One)

___ \$20 **Active Membership:** Spouses of Active Duty Members or in the Guard or Reserves with orders to the Maxwell AFB vicinity; Spouses living in the vicinity of Maxwell AFB whose spouses are Armed Forces Members serving elsewhere -----O-4 or E-7 and above

___ \$10 **Active Membership:** Spouses of Active Duty Members or in the Guard or Reserves with orders to the Maxwell AFB vicinity; Spouses living in the vicinity of Maxwell AFB whose spouses are Armed Forces Members serving elsewhere -----O-3 or E-6 and below

___ \$10 **Associate Membership:** Active duty, civilian personnel assigned to Maxwell AFB, spouses of civilian personnel assigned to Maxwell AFB; Adult relatives who are in permanent residence with the families of active duty; or any widows or widowers of Armed Forces whose spouses died after separating or retiring from the military whose status has not changed by remarriage

___ \$10 **Retiree Membership:** Spouses of retired military members

___ \$10 **International Membership:** Spouses of foreign members who are Permanent Party

___ \$10 **International Membership:** Spouses of foreign members who are Students

Country: _____

I am interested in the following special activities/mini clubs: ___ Book ___ Trips and Tours ___ Antiquing/Shopping
___ Wine ___ Crafts ___ Movie ___ Lunch Bunch ___ Mahjong ___ Childrens' Play ___ Men's Only ___ Bunco ___
Coffee ___ Other: _____

With my signature, I give my permission for:

- My info to be printed in the MGSC directory
- My photo to be used in the MGSC newsletter
- My photo to be used on the MGSC Facebook or Website

Check here if you DO NOT want your information in the directory, newsletters or websites

Signature: _____ Date: _____