

**Hawaii Aloha Chapter MOAA
Membership Application or Renewal**

Aloha and welcome to the Hawaii Aloha Chapter Ohana! Just take a few minutes to fill out the form below
and mail to the address indicated with your check for dues.

If you have questions or comments, please email us at info@moaa-hawaii.org

Hawaii Aloha Chapter, MOAA, Membership/Application Form																					
Revised: August 2024 . All prior forms obsolete. Check All Applicable Boxes																					
Enroll me as a Regular Member: <input type="checkbox"/> Each year of membership = \$20 ____ = No. of Years Five Years = \$90 <input type="checkbox"/>																					
Enroll me as a Spouse Member: <input type="checkbox"/> (i.e., spouse of a Chapter Regular member, or Surviving Spouse of a deceased officer)																					
Each year of membership = \$15 <input type="checkbox"/> Five Years = \$60 <input type="checkbox"/> NOTE Include Regular Member/deceased officer RANK Below																					
PLUS Partial Year Membership: <input type="checkbox"/> APR – JUN = \$15; <input type="checkbox"/> JUL – SEP = \$10 <input type="checkbox"/> OCT-DEC = \$5 = Total <input style="width: 50px;" type="text"/>																					
<u>Active Duty/current Guard/Reserve or 90 Years and Older = FREE</u>																					
Current/Retired/Last Rank held: _____																					
<u>Name</u> Last, First Middle/Initial(s) (PLEASE PRINT) <u>DOB</u> MM/DD/YYYY																					
<u>Address</u>																					
<u>City, State, Zip</u>	<u>Spouse's Name</u>																				
H _____	C _____																				
<u>Telephone Numbers</u> H=Home/C=Cell	<u>E-mail</u>																				
Applicant's Signature _____	<i>Mail Application Form and Membership Dues Check to Hawaii Aloha Chapter, MOAA P. O Box 201441 Honolulu, HI 96820</i>																				
Recruiter/Sponsor's Name _____																					
CHECK APPLICABLE BOXES <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left;"><u>STATUS</u></th> <th style="text-align: left;"><u>SERVICE</u></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Active</td> <td><input type="checkbox"/> US Army</td> </tr> <tr> <td><input type="checkbox"/> Reserve</td> <td><input type="checkbox"/> USAF</td> </tr> <tr> <td><input type="checkbox"/> National Guard</td> <td><input type="checkbox"/> US Navy</td> </tr> <tr> <td><input type="checkbox"/> Retired from AD</td> <td><input type="checkbox"/> USCG</td> </tr> <tr> <td><input type="checkbox"/> Retired from Res.</td> <td><input type="checkbox"/> USMC</td> </tr> <tr> <td><input type="checkbox"/> Former Officer</td> <td><input type="checkbox"/> USPHS</td> </tr> <tr> <td><input type="checkbox"/> Surviving Spouse</td> <td><input type="checkbox"/> NOAA</td> </tr> <tr> <td colspan="2">(indicate Rank <input type="checkbox"/> USSF above and check Service of Spouse)</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> National MOAA Member:</td> </tr> </tbody> </table>		<u>STATUS</u>	<u>SERVICE</u>	<input type="checkbox"/> Active	<input type="checkbox"/> US Army	<input type="checkbox"/> Reserve	<input type="checkbox"/> USAF	<input type="checkbox"/> National Guard	<input type="checkbox"/> US Navy	<input type="checkbox"/> Retired from AD	<input type="checkbox"/> USCG	<input type="checkbox"/> Retired from Res.	<input type="checkbox"/> USMC	<input type="checkbox"/> Former Officer	<input type="checkbox"/> USPHS	<input type="checkbox"/> Surviving Spouse	<input type="checkbox"/> NOAA	(indicate Rank <input type="checkbox"/> USSF above and check Service of Spouse)		<input type="checkbox"/> National MOAA Member:	
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<u>ACTIVE DUTY WAR VETERAN</u>																					
<input type="checkbox"/> KOREA 06/27/50 – 01/31/55																					
<input type="checkbox"/> VIETNAM 02/28/61 – 05/07/75																					
<input type="checkbox"/> OIF/OEF 08/02/90 – TBD																					