NATIONAL GEOSPATIAL-INTELLIGENCE ALUMNI ASSOCIATION

MEMBERSHIP APPLICATION (PLEASE PRINT CLEARLY)

1.	Name: Last First		Middle Initial	
	Preferred Title (Mr., Mrs., Miss, Ms., Dr., Military ran	k, etc.)	Preferred Name (Optional):	
2.			cable): OR Transfer date:	
			nent (NGA, NIMA, DMA, Other):	
4.	Last position held:	4b.	Professional affiliation(s):	
6.	Name of Spouse/Significant Other:			
	LastFirstMiddle Initi	al Pr	eferred Name (Optional): Title:	
	the case where both spouses are eligible in his/her ow parate listing is desired, and one spouse is already a me		y one fee will be assessed (and a joint listing will be used). If other may join at no additional fee.	
-Is	spouse: A current/former employee of NGA or predec	essor organ	ization: Yes No. If YES, retirement date:	
-Is	he/she a current NGAA Member: Yes No. If ye	es, indicate	Chapter(s): NGAA-East NGAA-West.	
2.	Main Address:			
	Street/PO Box:	_ City/Stat	te: Zip Code:	
	Phone: Cell:	e-	mail:	
3.	Alternate Address (if applicable):			
•	Street/PO Box: City/State: Zip Code:			
	Street/PO Box:	City/Sta	ite: 7in Code:	
	Phone: Cell/alternate pho	one:	e-mail:	
	Phone: Cell/alternate pho	one:		
4.	Phone: Cell/alternate photospecify time period at alternate address: <u>Chapter affiliation desired (check one)</u> . <u>Please not reciprocal</u> , voting privileges are accorded only to due	From: <u>From:</u> o <u>te</u> that, whos-paying mo	e-mail:	
4.	Phone: Cell/alternate photospecify time period at alternate address: Chapter affiliation desired (check one). Please not reciprocal, voting privileges are accorded only to due is accorded to dues-paying members of either Chapter	From: <u>From:</u> o <u>te</u> that, whos-paying mo	e-mail:email:email:email:entermational/social functions is embers of the specific chapter. Access to Chapter directories	
	Phone: Cell/alternate photospecify time period at alternate address: Chapter affiliation desired (check one). Please not reciprocal, voting privileges are accorded only to due is accorded to dues-paying members of either Chapter on the Chapter web sites.	From: <u>From:</u> o <u>te</u> that, whos-paying mo	e-mail: To: nile participation in Chapter informational/social functions is embers of the specific chapter. Access to Chapter directories information, including newsletters, is in the public domain NGAA WEST	
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*O pay a C Pro the	Phone: Cell/alternate phospherically contained to the CFCU member, join online at www.constellationfcu.org provide your CFCU account number, a gen email your application, along with your \$40 check payable to	From: ote that, when the series of the seri	e-mail:	
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If you would like to be contacted by a member of either, or both, Chapters, please check here:
Yes ____, NGAA-East ____Yes, NGAA-West.