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**APPLICATION FOR MEMBERSHIP**

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

Rank: \_\_\_\_\_ Designator: \_\_\_\_\_

Status: \_\_\_\_\_ Active Duty \_\_\_\_\_ Reserved \_\_\_\_\_ Retired (Effective) \_\_\_\_\_

Date Entering Service: \_\_\_\_\_ Date Commissioned: \_\_\_\_\_ Year Group: \_\_\_\_\_

Highest Enlisted Pay Grade and Rating: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Duty Station or Employer: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

For Association mailings, please use my \_\_\_\_\_ Home Address \_\_\_\_\_ Work Address

Chapter Affiliation: \_\_\_\_\_

Brief statement of how commission was obtained (include personal awards earned both enlisted and officer): \_\_\_\_\_

Brief statement of enlisted and commissioned service (include dates, duty stations, etc): \_\_\_\_\_

I certify that the statements and answers presented on this application, including any accompanying data, are true and complete to the best of my knowledge and belief. I hereby authorize the NMA to publish my name in the NMA Pony Express newsletter(s) and the annual Membership Directory.

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

Sponsored by (optional): \_\_\_\_\_

Mail this application with check in the amount of \$20 payable to NMA at:

Navy Mustang Association  
2550 Huntington Avenue, Suite 202  
Alexandria, VA 22303

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