

Office Use Only

Member Number: _____

Expiration Date: _____



Military Aviation Museum
 Membership Application
 501 (c)(3) Tax Deductible Foundation

Member Name: _____ Age: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____

Email: _____ Occupation: _____

Prior Aviation Experience: _____

Veteran: _____ Branch: _____ Duty: _____

Please contact me to become a volunteer. Interest: _____

Signature: _____ Date: _____

Individual - \$50 Annual Membership

Family - \$80 Annual Membership

Members of the Military Aviation Museum enjoy these benefits:

- Unlimited free admission to the Museum for one year
- 10% Gift Shop Discount
- Quarterly Newsletter Subscription
- Special Event Participation (Non-Private)
- Entrance to Maintenance Facility (Suffolk)

Methods of Payment:

Please make checks payable to
Military Aviation Museum

MasterCard VISA

Name on Card _____

Account # _____

Expiration Date _____

Signature _____

Total Payment _____

Mail completed form with payment to
 Membership – MAM
 1341 Princess Anne Road
 Virginia Beach, VA 23457

Fax completed form to (757) 204-2682

Please automatically renew my annual membership for subsequent years, until I cancel.

www.FighterFactory.com
www.VBairport.com
www.MilitaryAviationMuseum.org
 (757) 721-PROP