



SUPPORT GROUP APPLICATION

Date: _____

Check One: New Member

Renewal

Change of Address

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ e-mail: _____

Thank you for your membership in the Combat Infantrymen's Association as a SUPPORT MEMBER. You play an important role, for example: Donations - Your dues and donations help to pay for scholarships and charitable activities. Support Members can also actively participate in our meetings as an Adjutant – a person who helps write the minutes and/or expense report or you can assist in getting speakers or you can help design meeting announcements. You, the Support Member, make the choice as to how much you want to volunteer. Spouses and friends are welcome to join. We are a 501-c tax deductible organization.

I am a veteran Supporter.

The name of the veteran I am supporting is: _____

Or

I am a family member of a Veteran

The name of the veteran I am supporting is: _____

_____ I am already an Individual Support Member submitting my renewal

_____ I am a new Individual Support Member

Enclosed is my Contribution of \$20.00

Make check or money order payable to:
COMBAT INFANTRYMEN'S ASSOCIATION

And mail it with your dues to:
**Membership Chairman
Combat Infantrymen's Association
P.O. BOX 1000
Red Oak, TX 75154**

Phone: (828) 490-9303
e-mail: ciamemberapps@gmail.com

IMPORTANT – THE BLUE BADGE (the association newsletter) IS ONLY AVAILABLE AS A PDF

Be sure your email address is listed above, if you have one.

If you do not have your own email address, please provide an email address for a friend or family member that could receive an emailed copy of The Blue Badge Newsletter & print it for you.

Enter Here:

FOR OFFICE USE ONLY

METHOD OF PAYMENT: _____

PAYMENT AMOUNT: _____

DATE RECEIVED: _____