



APPLICATION FOR MEMBERSHIP

Return by Mail to:

Seawolf Association

C/O Dan Arnes

2082 W. 14050 S.

Bluffdale, Utah 84065-5362

Phone: (801) 253-1002 - Email: dan_arnes@yahoo.com

MEMBERSHIP TYPE

LIFETIME – \$250.00 – Full Privileges
(Life Membership May Be Paid with Five (5)
Consecutive **Quarterly** Payments of \$50.00)

REGULAR – Dues \$25.00 per year, Full
Privileges

FRATERNAL ASSOCIATE – Dues \$25.00
per year, NO Voting Privileges

ASSOCIATE – Dues \$25.00 per year, NO
Voting Privileges

FAMILY – Dues \$10.00 per year, NO
Voting Privileges

ELIGIBILITY

Must have served with **HA(L)-3; HC-1 Game
Warden Dets 29, 27, 25, 21; or FASU, Binh Thuy**
to become a **REGULAR** or **LIFETIME** member.

Any persons not qualified for regular membership
but are members of the military rotary-wing
community and wish to affiliate with the Association.

Any person who is not affiliated with any of the
above listed requirements, but has an interest in the
Association or what it stands for.

Immediate family members of KIA, or regular
Association members in good standing who died
after tour are eligible to carry on the membership as
long as they wish to remain affiliated with the
Association.

Name: _____

Address: _____ City: _____

State: _____ ZIP: _____ - _____

Phone: (____) _____ FAX: (____) _____

Email: _____

-----BACKGROUND INFORMATION-----

Dates in-country: _____

Willing to Help (Y/N): _____

Unit attached to: _____

If "Yes", how: _____

Detachment(s): _____

How did you hear of the Association? _____

Rank/Rate in-country: _____

Present Occupation: _____

Special Skills: _____

Check if Comments on Back

Payment Enclosed (**Make Check or Money Order Payable to Seawolf Association**)

Signature: _____ Date: _____

For Membership Coordinator:

Member Name: _____

Signature: _____ Date: _____

Check #: _____ Amount: _____ Date Deposited: _____