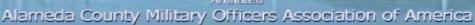


Alameda MOAA.org





2025 ALAMEDA MOAA MEMBERSHIP APPLICATION

Please Check One	Please Check One
New Member Renewal	Spouse Surviving Spouse Name and Rank of qualifying officer's spouse:
Military Status (please check one) Active Duty	red Guard/Reserve Former / Inactive
U.S. Service (please check one) Army Navy USP	Force Coast Guard Marine Corps PHS U.S. Space Force NOAA
Date: mm/dd/yyyyNational I	MOAA # *:
*National MOAA # not required;however, you can acquire free basic membershipat: https://www.moaa.org/content/join-moaa/why-join-moaa/	
Name:	Rank: Date of Birth: mm/dd/yyyy
	Phone: State: Zip Code
Address: Apt: Apt: Spouses Name:	City: State: Zip Code
I am interested in participating in a Chapter office or committee Yes No	
Membership is for the calendar year commencing	ng 1 January of each year.
Annual Dues: 1) Active Duty: \$0 2) Regular	r: \$20 / \$10 if joining after July 1 3) Spouse/Surviving Spouse : \$5
New Members: Please attach a copy of your military ID, DD-214, or other proof of service as a military officer.	
Make checks payable to: ALAMEDA COUNTY CHAPTER, MOAA or Easy Pay here Submit: Can be filled out electronically and emailed to alamedamoaamembership@alamedamoaa.org or mail MOAA Alameda County Chapter, c/o: Rudolf Bredderman, 35923 Romilly Court, Fremont, CA 94536.	

MOAA – ONE ASSOCIATION, ONE VOICE – YOURS

