

## UAV MEMBERSHIP RENEWAL FORM

Organization Name:	
Address:	
	, AZ Zip:
Name of Primary Representative: _	
	Email:
Name of Alternate Representative:	
Phone: 1	Email:
Name of Commander/President:	
Phone: I	Email:
UAV Membership Fee becomes du March 1 <sup>st</sup> of the year.	ne on January 1st of the year and is delinquent on
	(TAL), Veterans of Foreign Wars (VFW) and V) is \$100.00 annually. Renewal for all other
Please remit renewal form and a ch	Attn: Treasurer P. O. Box 34338 Phoenix AZ 85067