

## **Membership Application**

Name:	WIT#:	
Spouse/Companion:		
Street Address:		
City:		
State:		
Zip Code:		
Primary Phone:		
Secondary Phone:		
Primary email:	· · · · · · · · · · · · · · · · · · ·	Military service must be verified
Secondary email:		with a copy of your DD214, VA Card, State DL with Veteran
Military Service Branch(s):	· · · · · · · · · · · · · · · · · · ·	endorsement.
Active Duty: Active Duty or Res	erve Duty Dates:	
Retired: Retirement Date:		
Application Date:	<del></del> _	
We will mail you one ball cap and one v	risor Or two	ball caps:
New Member Fee \$40.00 and this year'	s Dues \$15.00, total: \$55.00:	
One-time Life Member fee \$115.00, Tot	al: \$155.00	
You must be a member in good standin	g (Current Dues Paid) of WIT	Club in order to join MILWIT.
Make checks payable to MILWIT and pr	resent with application to the	MILWIT Treasurer or mail to the
Treasurer at:		
Dale Detzel 5400 Tice St. Lot 237 Ft. Myers, FL 33905		
Data Received:	Office Use	
Date Received:Annual or Life Member	Military Service ID Verified By: _ Funds Received: \$	
Hats/Patches/Rooster/By Laws Sent:	ι απασ ποσοίνοα. ψ	
Date	Ву	