



Application for 12th TFW Association Life Membership

Name:

Spouse's Name:

Email address (if none, so state):

Phone Number:

Mailing address:

Alternate Contact Info (Relative/Friend):

Name & (Relation):

Address:

Email:

Unit/Organization/Base Assigned:

Time Period at Location:

Primary Job Function While Assigned:

Life Membership \$30. Check or money order payable to 12 TFW Assoc

Complete this application and mail check or money order to:

Jim Mindak

934 N. Ventura Dr

Palatine, IL 60074-3735

chiefjimcfd@sbcglobal.net

(312) 213-7302

12th TFW Assoc Membership Services

12th TFW Patch & Decal, Life Membership card will be sent after joining.