

NAVAL ACADEMY PARENTS' CLUB OF NORTHERN VIRGINIA MEMBERSHIP APPLICATION/RENEWAL FORM

Please provide whatever information is currently available to you (we'll contact you later to fill in blanks):

Parent Information: (enter information in the shaded blocks)

First & Last Names of Parents => (as you want them to appear in the Membership Directory. Please note class year if you are a USNA graduate.)	
Title (Dr., Col., CAPT....) =>	
Home Address =>	
Home Phone =>	Home:
Cell Phone =>	Cell:
Primary E-mail =>	
Secondary E-mail =>	

Midshipman Information:

First and Last Name =>	
Nickname (how he/she wants to be addressed)	
Class of =>	Company => <small>Leave blank if unknown</small>

MEMBERSHIP DUES

Four-Year Membership - (01 June 2011 -31 May 2015):	\$125
One-Year Membership - (01 June 2011 – 31 May 2012 - renewable at \$30 per year):	\$60
Fleet Family Membership - For Graduates Only: (One time payment)	\$10

NAME TAGS (for PARENTS)

Name tags are included with both 4 and 1 year memberships. If a nametag needs to be replaced/updated the fee is \$8.00

Parent Names as you want them to appear on the name tags, note your USNA class year if applicable.	
Midshipman First Name & Class Year (if more than one midshipman, list all names and class years)	

VOLUNTEERS

I/We would be interested in working on a committee or becoming a board member for the Parents' Club.....tell me more.

Please mail this completed form and your check to: Patrice Martinez 14524 Crossfield Way Woodbridge, VA 2219 703-910-4685	<table style="width: 100%; border: none;"> <tr> <td style="padding: 5px;">Membership fee:</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;">\$8.00 for each additional/replacement or updated Nametag: # _____</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;">Total (amount of check):</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Checks payable to: USNAPCNVA</td> </tr> </table>	Membership fee:	\$ _____	\$8.00 for each additional/replacement or updated Nametag: # _____	\$ _____	Total (amount of check):	\$ _____	Checks payable to: USNAPCNVA	
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