



Aerospace Education Membership (AEM) Application

(Please print clearly)

Last Name _____ First _____ MI _____

DOB _____ Gender _____

Address _____

City _____ State _____ Zip Code _____

Primary E-mail (Not school email) _____

Secondary E-mail _____

Day Phone _____

BACKGROUND: Yes or No

- Are you a citizen of the United States? _____
- Have you ever been convicted of a felony? _____

- *Do you have prior Military Service? _____
If yes: Retired **OR** Honorable Discharge
- Are you **currently** charged with any felony? _____

EMPLOYMENT: ___ Teacher ___ Counselor ___ Principal ___ Superintendent ___ Other

CLASSROOM: ___ PreK-Grade 2 ___ Grades 3-5 ___ Grades 6-9 ___ Grades 10-12 ___ Other

INSTRUCTIONAL AREA: ___ Science ___ Math ___ Social Studies ___ Language Arts
 ___ Aerospace Education ___ JROTC ___ Other ___ Not Applicable

SCHOOL NAME: _____

SIGNATURE OF APPLICANT _____ **DATE** _____ **SOCIAL SECURITY NO. (LAST 4)**

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Membership commences on the date processed by National Headquarters and the individual's name appears on the National Headquarters database.

\$35 MEMBERSHIP DUES

Select payment option below:

- Check - payable to Civil Air Patrol NHQ
- Credit card - complete the following information:
 - Visa Master Card Discover

Credit Card Number _____

Expiration Date _____ Security Code _____

Daytime Telephone _____ Email _____

Name as it appears on credit card _____

Signature of credit card holder _____

SEND TO:
CIVIL AIR PATROL / AE
 Aerospace Education Membership
 105 S. Hansell St.
 Maxwell AFB, AL 36112-6332
 FAX: (334) 953-6891
 E-mail: ae@capnhq.gov
(send scanned, completed application as attachment)

For CAP NHQ use only!

NAT CC/DESIGNEE: INITIAL / DATE _____ Special Application Number 021507