



Chief Warrant and Warrant Officers Association Long Island Sound Chapter

Application for Chapter Membership

I hereby apply for membership in the Long Island Sound Chapter of the Chief Warrant and Warrant Officers Association, USCG.

I understand that:

- My full membership and voting privileges are valid so long as I am in good standing in accordance with the chapter bylaws.
- Membership in The CWO Association is also required.
- Dues are \$36.00 per year and due in the month of January.

Name: _____

Last	First	M.I.	Rank/Specialty	Date Appointed
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Current Duty Station: _____ Date Reported: _____

CWOA Membership Date: _____ CWOA Member # (from ID card): _____

Previous CWOA Office(s) Held: _____ Dates Held: _____

Previous CWOA Office(s) Held: _____ Dates Held: _____

Previous CWOA Chapter Office(s) Held: _____ Dates Held: _____

Previous CWOA Chapter Office(s) Held: _____ Dates Held: _____

To apply, print this form, fill it out and either mail it, with check or money order, to **CWO Sarah E. Schafer, Treasurer, CWOA LIS Chapter, 37 Mohegan Ave, New London, CT, 06320.**

(508) 566-9033 Sarah.E.Schafer@uscg.mil

or: Present this form with payment to any chapter officer.

Amount Paid: \$ _____ Date: _____

Treasurer confirms dues paid: VP confirms welcome package sent: X _____
President acknowledges new member

OFFICIAL USE ONLY: _____