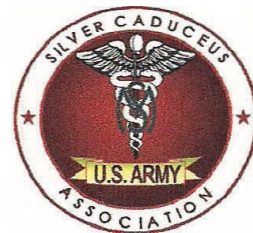




SILVER CADUCEUS ASSOCIATION, INC.

Membership Application



The Silver Caduceus Association is for Medical Service Corps Officers and Warrant Officers who have served in the active component, National Guard or Reserves in the US Army, and their surviving spouses. Other AMEDD Officers, MSC Officers from other military services and AMEDD civilian employees may join as Associate Members when recommended by a SCA member and approved by the Board of Directors

First Name: _____ **MI:** ____ **Last Name:** _____ **Rank:** _____
(build a select box for Rank options)

Spouse's Name: _____

Home Address: _____
(Mailing address with apartment or lot number if applicable)

City: _____ **State:** _____ **Zip Code:** _____

Phone #s, Home: _____ **Cell:** _____ **Work:** _____

Email Address: _____
(Personal email is preferred over a work email whenever possible)

Dates of Service: _____ **to** _____ **Status:** _____ **Primary AOC:** _____
(MM/YY) (MM/YY) (build a select box for status) (build a select box for available AOCs)

Membership Dues:

Regular membership: \$15 per year or \$50 for five years
(Recommend multiple year new and renewal memberships to reduce expenses to self and the association)

Lifetime membership: onetime fee of \$350

All new members regardless of type: add \$10 admin fee

Amount remitted: _____

I (authorize or do not authorize) the use of my name or photo for use in SCA publications.

Applicant's Signature _____

Date _____

Mail completed application and check to:
Silver Caduceus Association, Inc.
P.O. Box 18218
San Antonio, TX 78218