SPECIAL FORCES ASSOCIATION
Chapter XXXVII
Andy Andersen
13600 Kristoffer Lane
Orland Park, IL 60467-6870

MEMBERSHIP APPLICATION

MEMBERSHIP TYPE
- ❑ Associate Membership
- ❑ General Membership
- ❑ Decade Membership

_____
Last First MI

SSN_____

_____ Telephone (_____)_____
Mailing Address

_____
City State Zip (plus 4)

Awarded–Prefix_____ "3"Suffix "S,"5G, 18/180 Series MOS on_____
Total years and months of service to Special Forces and/or related units_____years_____months.

SF ASSIGNMENTS

Units & Inclusive Dates

_____
_____

_____

MEMBERSHIP QUALIFICATIONS

1. All units officially listed on the 1st SF lineage certificate are acceptable for membership. Also acceptable are service in the Office of Strategic Services, Ranger units, Partisan Forces Korea, 110th Recon, and school assignments requiring a PCS from any SF unit. (Must be in conjunction with Special Forces Duty.)

2. DECADE MEMBER: Decade membership may be granted to a person who is or has been a member of the US Army Special Forces, including the US Army Reserve and the National Guard for a minimum of ten years, who has been awarded a Prefix "3" or the Suffix "S," 5G, 18/180 series, and if discharged, has received an Honorable Discharge. Decade membership may be granted to members who have a combination of 10 years Special Forces duty and Special Forces Association membership. (Documents required.)

3. GENERAL MEMBERSHIP: Membership may be granted to a person who is or has been a member of the US Army Special Forces, including US Army Reserve, and the National Guard, who has been awarded a Prefix "3" or the Suffix "S," 5G, 18/180 series MOS and if discharged, received an Honorable Discharge. (Documents required.)

4. ASSOCIATE MEMBER: Associate membership may be granted to any person not qualified as above, but who has contributed significantly to the support of Special Forces, or its lineage, in the accomplishment of its mission. Applications for Associate membership are subject to the approval of the Membership Committee. Proof of contribution to Special Forces must Accompany the application.

AUTHORITY FOR THE RELEASE OF INFORMATION AND RECORDS

I hereby authorize and consent to the release of information and records bearing on my military service and to the Special Forces Association. The information will be used for the purpose of determining my qualifications for membership. I further certify that the execution of this form is voluntary and shall be valid for one year after my signing.

Signature_____ Date: _____

Witness_____ Date: _____

I understand that Special Forces Association Membership entitles me to all the rights and privileges specified in the provisions of the Special Forces Association Constitution. Enclosed is a check or money order for $30, payable to the SFA for the initiation fee ($5.00) and first year dues ($25.00). To maintain my membership, I will pay the annual dues of $25.00 no later than 31 January each year. If paid after 31 January, I must pay an additional $5.00 reinstatement fee (total of $30.00). Lifetime membership is available to members in good standing at a cost of $300.00. All qualified new members must pay a total of $330.00 for Lifetime membership. Note: Including a photo copy of your DD214 or orders identifying you as a member of an SF unit will greatly expedite the paperwork process.

FOR OFFICIAL CHAPTER USE ONLY: Date Received:_____ Date sent to National:_____

Check Nr._____ Approved:_____ Date:_____