



Psychological Operations Regimental Association MEMBERSHIP APPLICATION

Please Print Legibly: New Member Renewal Change of Address

Rank / Title / Mr. / Mrs. / Ms.: _____

Last Name: _____ First Name: _____ MI: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Cell: _____ Home: _____

Non-Military Email: _____

Retired Active Duty Reserve National Guard Civilian

Chapter Affiliation: Member at Large Tampa, FL

To join the Fort Bragg Chapter, please go to <https://fortbraggpra.org>

PRA MEMBERSHIP	
Annual Membership:	
E7 and above, Civilians, and Former Military.....	\$30
E6 and below.....	\$20
Lifetime Membership:	
E7 and above, Civilians, and Former Military.....	\$300
E6 and below.....	\$200

Payment Information:

Enclosed is a check or money order. Check # _____

Paypal online payment. www.paypal.me/prashoot

Signature: _____ Date: _____

Please make check or money order to: PSYOP Regimental Association

Mailing Address: PRA, P.O. Box 73126, Fort Bragg, NC 28307

Phone: 910-396-4349

For Office Use Only:		
Membership Approval:	Yes	No
Payment Received:	Yes	No
Membership #	_____	
Expiration Date:	_____	