

Mary Esther, FL 32569

Hurlburt Spouses' Club PO Box 631, Mary Esther, FL 32569

Membership Form 2018-2019

Date:	New Memb	perReturning Member
HSC Member's Name (Please Print	i):	
Sponsor's Name:	Spo	nsor's Organization:
My Sponsor is (circle): Active Duty	y Retired	Reserve DOD Other
Address:		
City:		Zip:
Phone:		hday
Email: (Note: Event Invitations, RSVP)		
Membership Directory: Can we shat *(Available to HSC members only) Volunteer Opportunities:	re your informa	
Dues are based on sponsor's AD, retired or civilian equivalent rank as follows: (Please circle one) E1-E4: \$20 === E5-E7/O1-02: \$30 === E8-E9/O3: \$40 === O4 and up: \$50		
*Payment can be made via cash or check **Monthly Socials and Special Activities		addition to dues
I understand that it is my responsibility to pay (when a meal is ordered). If I do not cancel r I will be considered a "no-show" and billed a	ny reservation by th	e deadline and I do not attend the event,
Signature:		Date:
Please turn in this form (with payment) at any HS Hurlburt Spouses' Club Attn: Membership	C Social or mail it to:	Check #
PO Box 631		Revd by Initials