**415 SQAUDRON ASSOCIATION  
MEMBERSHIP APPLICATION FORM**

|  |  |
| --- | --- |
| Name |  |
| Rank (Indicate if Retired) |  |
| Phone Number |  |
| Address |  |
| Primary Email |  |
| Secondary Email |  |
| Years As A Swordfish |  |

Please print this page and fill out the information above so that we can establish as complete a database of the Alumni members as possible. Then mail it with your membership fee of $25 to the address below:

**415 Squadron Association  
C/O Greenwood Aviation Museum  
P.O. Box 786**  
**Greenwood, NS B0P 1N0  
Canada**

**NOTE:** Membership is free for WWII Veterans of the Squadron.