

FOREIGN JOINT SERVICES NCO'S ASSOCIATION MEMBERSHIP APPLICATION

Country	Service	Rank	Surname	First Name	Member Since	End of US Tour	Military Status
Home E-mail		Home Address				Cell Phone	
Work E-mail		Work Address				Work Phone	
Significant Other's Name							
I, the undersigned, being a member of hereby apply for membership in the FJSNA						IA for the	
following period: Whole Year From through (Jan-Dec) (Example: Jan 2022 through Jun 2022)							
Enclosed in my Zelle/Check payment in the amount of: Zelle / Check #: Zelle / Check #: (\$60.00 US for a full year membership / \$5.00 US for each month of membership)							
By signing this application I declare to have read and accept the Constitution of FJSNA (located on FJSNA.org).							
Member Signature		Date		Country/Service		Rep. Signature	
Do NOT write belo	w this line: Fo	r Members	ship Director	and Treasurer us	e only		
Record Validation – Sign and date once record/funds are validated							