

AeroMed Evac Association (AMEA) Membership Application

Membership is open to anyone regardless of rank that served in a US Air Force, Aero Med Evac Unit in any capacity. This includes Reserve units and the National Guard. Membership is also open to Widows, Widowers, and Children whose parents and spouses served in any Aero Med Evac Unit.

Rank: _____ **Name:** _____ **Nickname:** _____

Known By Maiden Name: _____

Spouse's Name: _____ Is spouse a aeromedical member, also? _____

What position (Nurse/Med Tech/MSC, etc.?) _____

Mailing Address: _____

Online Addresses (if available): E-Mail: _____

Homepage: http://_____

Phone numbers: Home (____) _____ **Work or Fax:** _____

May we post your address on AMEA Website (only available to other AMEA members)?
Yes _____ No _____

Post your phone number on AMEA Website (only available to other AMEA members)?
Yes _____ No _____

Membership: New _____ Renewal _____

Status: Retired _____ Active Duty _____ Reservist/National Guard _____ Dependent _____

History: AeroMed units assigned, location, period of time, aircraft flown assigned:

Military Department: USAF _____ US Army _____ Other _____

Circle your Crew/Duty Positions: (Commander, Pilot, Flight Nurse, Flight Mech/Engineer, Admin/Logistic Support, Med Tech, MSC Officer, Casual Staging Personnel, Other): _____

Fill in the printed form; enclose \$12 annual membership dues (\$100 for Life Membership). Make checks payable to AMEA.

Send U.S. Postal Mail To:

AeroMed Evac Association (AMEA)
John R. Higuera, Treasurer
3148 Fountain Plaza Drive
Hanford, CA 93230
E-Mail: john.higuera@amea.us