



MEMBERSHIP FORM 2019-2020

Date Rcvd _____
Check # _____
Cash _____

Applicant Information:

Name: _____ (Rank/Grade if applicable): _____
Address: _____ City: _____
State: _____ Zip Code: _____ Email: _____ Month/Day of Birth: _____
Phone: Home: _____ Cell: _____ Work: _____

May we publish the above information in our membership directory? Yes No

The following is for protocol purposes only and is optional:

Rank/Grade/Name of Spouse: _____

Check all that apply: ___ Active Duty ___ Retired ___ Civilian ___ Spouse Deceased

Unit or Tenant Organization Affiliation: _____

May this information be included in the RIAWC Membership Directory? Yes No

Newsletter will be emailed unless you request a paper copy. Request a paper copy? Yes No

Do you have any special dietary needs? _____

Eligibility Information (REQUIRED) Please check category as applicable at Rock Island Arsenal:

___ Active Duty Military or Spouse ___ Active/Retired DOD Civilian or Spouse
___ Retired Military or Spouse ___ Active/Retired Contract Employee/Spouse
___ Reserve Military or Spouse ___ Active/Retired Tenant Activity or Spouse
___ National Guard or Spouse ___ Former/Current RIAWC Member no longer associated with RIA
___ POW/MIA or Spouse ___ Volunteer in RIA philanthropic organization (Arsenal Attic, ACS, etc.)
___ Spouse of Deceased Military Member

Scholarship Eligibility (Optional)

Do you have a dependent child graduating from High School in 2020? Yes No

Do you have a dependent child who is attending college (Continuing Education Student)? Yes No

Areas of Interest (Optional)

Are you interested in serving on the RIAWC board? Yes No

Particular area of interest and experience: _____

Are you willing to serve on any of the following committees?

___ Community Support Committee ___ Fundraising Committee ___ Nominating Committee
___ Program (Luncheon) Committee ___ Scholarship Committee

Participate in club activities?

___ Book Club ___ Breakfast Club ___ Bunco ___ Craft Club ___ Lunch Bunch ___ Touristas

Are you interested in volunteering with RIAWC or Community opportunities?

___ Help with Special Activities ___ Decorating ___ Golf Outing ___ Fundraising ___ Give a Class/Program ___ Hospitality
___ Army Community Service ___ Red Cross ___ Arsenal Attic Thrift Shop

APPLICATION SUBMISSION

Please make checks payable to "Rock Island Arsenal Welcome Club" or "RIAWC." Mail or return form to: Membership Chair RIAWC, P.O. Box 3186, Rock Island, IL 61204-3186

Receipt of this form and dues of \$30 will initiate your RIAWC Membership for the 2019-2020 year.

The Rock Island Arsenal Welcome Club is a 501(c)(4) organization. Membership and fundraising contributions are not tax deductible as charitable contributions. Business may be able to receive a business deduction in certain limited circumstances.