



Commemorative Air Force **GULF COAST WING**



Membership Application

2015
(Please Print)

NAME: Date of Birth (Optional)

ADDRESS:

 State
 Zip

COL ID # LM # Date of Commission

SPOUSE: HOME PHONE #

OFFICE PHONE # MOBILE/CELL #

EMAIL ADDRESS

Are you an aircraft sponsor? YES NO (Types are Full, Restoration, or Supporting)
(If YES, Please advise type and aircraft you sponsor:

Are you a member of another CAF Unit? YES NO (If YES, Please advise)

What are your hobbies? _____ Do you have any
professional skills you want to tell us about? _____

Are there areas of special participation in the Gulf Coast Wing and/or in the CAF in which you
wish to take part? (ex: maintenance, rides-program, tour-administration, social-activities, PX, or you tell us)

Do you have any comments, suggestions or questions for us? _____

WING DUES ARE \$50.00 EACH YEAR. YOU MUST BE A MEMBER OF THE CAF TO
JOIN. PLEASE MAKE YOUR CHECK PAYABLE TO **GULF COAST WING – CAF**, and
SEND YOUR PAYMENT TO:

Col Rex E. McLain III, Adjutant
17638 Seven Pines Dr.
Spring TX 77379

Colonel McLain's email: breitlingsteeler@hotmail.com
Telephone Contacts: Cell: 281-639-6480

Visit us online at www.gulfcoastwing.org or www.gulfcoastwing.com