



**THE  
DISTINGUISHED  
FLYING CROSS  
SOCIETY**

# Associate Membership Application

DFCS MEMBER'S NAME: \_\_\_\_\_

ASSOCIATE PERSON'S NAME: \_\_\_\_\_

Male  Female

Associate's Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

ASSOCIATE PERSON'S ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TEL: \_\_\_\_\_ CELL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

RELATIONSHIP TO DFCS MEMBER: \_\_\_\_\_

How did you hear of us? \_\_\_\_\_

Electronic Submission Address: [DFCS@DFCSociety.org](mailto:DFCS@DFCSociety.org)

P.O. Box 502408, San Diego, CA 92150  
Office: (866) 332-6332 [www.dfcsociety.org](http://www.dfcsociety.org)

**“QUALIFICATIONS FOR MEMBERSHIP”**

1. Must be a spouse, relative or descendant of a **DFCS member**.
2. Your signature on this application gives DFCS authorization to publish same in DFCS News Magazine, website, and any DFCS-sponsored publication.
3. DFCS reserves the right to independently verify any data you submit.
4. Membership dues must be kept current.

**Associate Membership Dues**

- ( ) One-Year \$ 40
- ( ) Three-Year \$105
- ( ) Five-Year \$170





**Lifetime Membership Dues**

- ( ) Age 81 & above \$100
- ( ) Age 76 - 80 \$200
- ( ) Age 71 - 75 \$300
- ( ) Age 66 - 70 \$400
- ( ) Age 60 - 65 \$500
- ( ) Age 59 & above \$600

**SIGNATURE:** \_\_\_\_\_

DATE: \_\_\_\_\_

**Above signature indicates I have read and understand the “Qualifications For Membership”**

() Check Card Type:        

Card #: \_\_\_\_\_

Name on CC: \_\_\_\_\_

Exp. Date: \_\_\_\_ / \_\_\_\_

Address if different from above \_\_\_\_\_

Please make check payable to:

**The DFC Society**  
**P.O. Box 502408**  
**San Diego, CA 92150**



**PLEASE FILL IN DFCS MEMBER'S MILITARY INFO, IF AVAILABLE**

BRANCH OF SERVICE	✓	ERA	✓	MISCELLANEOUS	DETAILS
U.S. Army	<input type="checkbox"/>	WWII	<input type="checkbox"/>	Type/Model of Aircraft	
U.S. Marine Corps	<input type="checkbox"/>	Korea	<input type="checkbox"/>	Unit	
U.S. Navy	<input type="checkbox"/>	Vietnam	<input type="checkbox"/>	Crew Position	
U.S. Air Force	<input type="checkbox"/>	Space	<input type="checkbox"/>	Theatre	
U.S. Coast Guard	<input type="checkbox"/>	Desert Storm	<input type="checkbox"/>	Highest Rank	
	<input type="checkbox"/>	GWOT	<input type="checkbox"/>	Highest Award Received	
	<input type="checkbox"/>	Other	<input type="checkbox"/>		

*For Office Use Only:*

Received	
Check #	
Amount	
CC Auth.	
Associate Exp. Date	
	Payment posted
	Database entry
	Website entry
	Certificate/ID Card
	Welcome packet