

The North West Territory Alliance

Change of Information Form



Individual Membership Application

CHECK ONE: ___ New Member Application ___ Current Member, Change of Information

CHECK ONE, IF APPLICABLE: ___ Dues, Single Membership¹ (\$20.00) ___ Dues, Family Membership² (\$25.00)

___ Publication Subscription only (\$10/year) **Total Fees Enclosed \$** _____

Please Print Clearly

Unit Name: _____

Voter #1: _____ DATE JOINED _____
(Last Name) (First Name)

If Family membership:

Voter #2: _____ DATE JOINED _____
(Last Name) (First Name)

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: (____) _____ - _____ E-MAIL ADDRESS: _____

QUALIFYING DEPENDENTS AND YEAR JOINED:³ Include last name if different from above.

ALTERNATE UNIT(S), IF ANY: _____

APPLICANTS SIGNATURE: _____

UNIT COMMANDER'S SIGNATURE: _____

¹ Single membership is restricted to one (1) voting member and qualifying dependent(s). \$20.00/year (includes Courier).

² Family membership is restricted to two (2) voting members and qualifying dependent(s). \$25.00/year (includes Courier).

³ Qualifying dependents have no vote and must meet one of the following conditions:

- A. Under 18 years of age and living at the same address.
- B. Full-time student.
- C. Member of the military on active duty.
- D. A minor for whom the voting member(s) have assumed responsibility during events by filing letters to that effect with the NWT A Adjutant General from both the voting members(s) and the parent/guardian with whom the minor resides.

Group check from entire unit is preferred. Make checks payable to North West Territory Alliance.
Mail Completed Form to: Jane Whiteside, Adjutant General, NWT A, 8417 Adbeth, Woodridge, IL 60517
Updated 11/12/09