

The Florida Gulf Coast Parents' Club—USAFA, Inc. United States Air Force Academy

Membership Form

We/I would like to join the Florida Gulf Coast Parents Club. Enclosed is payment for the 2011--2012 school year dues. Please make your membership checks payable to: The Florida Gulf Coast Parents' Club—USAFA, Inc. Send your check and completed form to:

Walt Herrera, FGPC Treasurer
1424 Crooked Stick Drive
Valrico, FL 33596
w.t.herrera@verizon.net
Ph: 813-684-2528

Title: Mr. Mrs. Mr. & Mrs. Ms. (circle one)

Parent's Name(s) _____ (include first name/s)

Street Address _____

City: _____ State: _____ Zip: _____

Area Code: _____ Phone Number: _____

E-mail Address: _____

Cadet Name: _____

Class of: _____ Cadet's date of birth: _____

Squadron # (if known) _____ Cadet's P O Box #: _____

Dues: for a full (4) four years	\$140.00 for each Cadet enrolled
3 Years	\$120.00 for each Cadet enrolled
2 Years	\$ 80.00 for each Cadet enrolled
1 Year	\$ 40.00 for each Cadet enrolled

Amount submitted: _____ Check Number: _____

Comments: _____
