

(FORM TO BE FILLED IN CAPITAL LETTERS ONLY)

PASSPORT SIZE JOINT
PHOTOGRAPH IN CIVIL
DRESS

SPOUSE

AIR FORCE ASSOCIATION

(Regn No. S/11186/dated 15 Sep 1980)

PASSPORT
SIZE SELF
PHOTOGRAPH
IN CIVIL
DRESS

AFA LIFE MEMBERSHIP APPLICATION

SERVICE NUMBER	
RANK	
NAME & INITIAL	
DATE OF BIRTH	
DATE OF DEATH	
DATE OF COMMISSION / ENROLMENT	
DATE OF DISCHARGE/RETIREMENT	
PPO NUMBER	
PRESENT ADDRESS FOR COMMUNICATION:	
Dist :	State: Tamil Nadu PIN:
MOBILE NUMBER	
E. MAIL ID	
NAME OF SPOUSE	
DATE OF BIRTH OF SPOUSE	
NAME OF NEXT OF SKIN (If wife pre-deceased)	
RELATIONSHIP (Son or Daughter)	
PPO Number:	
I hereby certify that as a member I will abide by the constitution of the AF Association.	
Date:	Signature
(FOR OFFICE USE ONLY)	
Membership Fee :	
DD / Cheque No.:	Date :
AFA TN Receipt No. :	Date:

TN Regn No :

LMS NO:

LIFE MEMBERSHIP FEE DATAILS

OFFICERS /SPOUSES : Rs 6,000/-

AIRMEN/SPOUSES : Rs 3,000/-

NC(E) : Rs 1,500/-

Note :

1. Attache a copy of ESM Id card and PPO (or Discharge certificate)
2. DD/Cheque to be drawn in Favour of "Air Force Association, Tamil Nadu Branch", payable at Chennai.