

# CLASS OF 2010 Cadet

## APPOINTEE INFORMATION

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_  
*Street Address*

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

My signature authorizes the Association of Graduates to activate my AOG membership as I've indicated below. (Cadet membership entitles you to all AOG benefits except voting privileges.)

Signature \_\_\_\_\_ Date \_\_\_\_\_

## PAYMENT OPTIONS *(Check applicable option. Prices good through June 30, 2007.)*

- Best Value* - Single payment (\$600)
- Cadet payroll deduction (\$59 quarterly for 11 months starting July '07)
- 24-month payment by credit card (\$27 per month for 24 months)
- 12-month payment by credit card (\$52 per month for 12 months)

## PAYMENT INFORMATION *(Check one)*

- Payroll deduction: Selecting this option authorizes USAFA Financial Services Office to withdraw from my cadet pay account in these months: July '07, October '07, January '08, April '08, July '08, October '08, January '09, April '09, July '09, October '09, January '10.
- I have enclosed a check made payable to the Association of Graduates.
- I would like to pay by credit card. (The AOG accepts all major credit cards.)

Card number 

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 Expiration date (mo/yr) 

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Name as it appears on card: \_\_\_\_\_

**Membership refund policy: If at any time you leave the Academy, the AOG will refund the balance of your membership.**

Please use the enclosed return envelope to mail your completed membership form. You also may fax it to Don McCarthy at (719) 333-4194. For more information, please contact Don McCarthy at (719) 472-0300 or don.mccarthy@aogusafa.org.