

# SUBMARINERS ASSOCIATION OF CANADA WEST



## APPLICATION FOR MEMBERSHIP

Surname \_\_\_\_\_ Given Names \_\_\_\_\_

Nickname \_\_\_\_\_ Spouse \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Country/Branch of Service/Rank \_\_\_\_\_

Honours/Awards/Medals \_\_\_\_\_

SUBMARINE SERVICE: Year designated as 'Qualified in Submarines' \_\_\_\_\_

Name of Submarine:	Type / Number:	Years From/To:	Comments:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

1. Qualified Submariners of all nations are welcomed as members.
2. A copy of service documents or other proof of service may be requested to confirm your application.
3. Dues are \$15 per calendar year, plus an optional \$10 if you wish to be included in our Standing 50/50 Draws. Membership includes regular email Bits n' Bytes and on-line Scuttlebutt.

**Applicants Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Please mail completed form with  
cheque covering dues to:**

**SAOC WEST  
3511 Blanshard Street  
PO Box 48154  
VICTORIA, B.C.  
CANADA V8Z 7H6**

***IF MORE SPACE  
IS REQUIRED  
PLEASE USE  
REVERSE SIDE.***

### **FOR SAOC USE ONLY**

#### **Executive Member Verification**

\_\_\_\_\_  
**Name Date**

\_\_\_\_\_  
**Signature**