

# TUSKEGEE AIRMEN, INC. (TAI) MEMBERSHIP DATA/APPLICATION

Please mark the method (mailing address OR email address) you prefer for TAI to contact you with a X or checkmark.

PLEASE PRINT  
LEGIBLY

 NEW

 RENEWAL

 RECORD UPDATE/TRANSFER

Date: \_\_\_\_\_

Title/Rank	First Name	MI	Last Name	Jr., Sr., etc.
Address Line 1		Notify/Contact me at this address <input type="checkbox"/>	Address Line 2	
City		State (Country)	Zip Code + Four (Post Code)	

Home Phone ( ) ( )	Office/Work Phone ( ) ( )	Fax Phone ( ) ( )	Cell/Mobile Phone/Other ( ) ( )
E-Mail Address			Notify/Contact me at this address <input type="checkbox"/>

<input type="checkbox"/> Officer (O1-O3)	<input type="checkbox"/> Air Force	<input type="checkbox"/> Active Duty
<input type="checkbox"/> Officer (O4-Above)	<input type="checkbox"/> Army	<input type="checkbox"/> Nat'l Guard
<input type="checkbox"/> Enlisted	<input type="checkbox"/> Coast Guard	<input type="checkbox"/> Reserve
<input type="checkbox"/> Civil Svc	<input type="checkbox"/> Marines	<input type="checkbox"/> Separated
<input type="checkbox"/> No Mil/ Civil Svc	<input type="checkbox"/> Navy	<input type="checkbox"/> Retired

Highest Rank Held

Mil/Civ Pay Grade

Years of Svc

### OTHER MEMBERSHIPS

<input type="checkbox"/> OBAP	<input type="checkbox"/> AFCOMAP	<input type="checkbox"/> NAACP
<input type="checkbox"/> BPA	<input type="checkbox"/> ROCKS	<input type="checkbox"/> LINKS
<input type="checkbox"/> BCAF	<input type="checkbox"/> NNOA	_____
<input type="checkbox"/> NSBE	<input type="checkbox"/> MPMA	_____

I agree to abide by the Constitution and Bylaws of the Chapter and of Tuskegee Airmen, Inc. (TAI), and I authorize TAI to use my personal information to conduct background checks in conjunction with my participation in youth activities, as required.

Print Full Name

Signature

#### MEMBERSHIP CLASS

<input type="checkbox"/> Regular (R)
<input type="checkbox"/> Student (S)
<input type="checkbox"/> Organization (O)
<input type="checkbox"/> Honorary (H)
<input type="checkbox"/> Life (L)

#### MEMBERSHIP CATEGORY

<input type="checkbox"/>	Assigned to Tuskegee Army Air Corps Program; unit at Tuskegee Army Air Field; or unit growing out of Tuskegee Experience, from Jan 1941 through Sept 1949. <b>(Experience - TE)</b>
<input type="checkbox"/>	Is spouse or descendent of a Experience Category (TE) member. <b>(Heritage - TH)</b>
<input type="checkbox"/>	Is a member of Tuskegee Airmen, Inc. in category other than TE/TH. <b>(Associate - TA)</b>

### FOR CHAPTER USE

Chapter Name: \_\_\_\_\_

Official Chapter Address \_\_\_\_\_

\_\_\_\_\_

Eastern       Central       Western

Date Received \_\_\_\_\_

Amt Received    Chptr \$ \_\_\_\_\_ Nat'l \$ \_\_\_\_\_

Received by (Signature) \_\_\_\_\_

For Renewals, Chapter Fill-In TAI Number >

### FOR NATIONAL USE

#### National Office Processing

Date Received \_\_\_\_\_

Amt Received \$ \_\_\_\_\_

Received by (Signature) \_\_\_\_\_

#### Membership Processing

Date Received \_\_\_\_\_

Tuskegee Airmen Identification Number \_\_\_\_\_

Date Fwd to Mbr \_\_\_\_\_

## TUSKEGEE AIRMEN, INC. (TAI) MEMBERSHIP DATA/APPLICATION INSTRUCTIONS

**Application Action:** Place "X" in appropriate box(es) to identify purpose of application:

**New:** First-time applicant (or previous member with more than 1-year lapse in financial membership).

**Renewal:** Current financial member submitting application for next membership year.

**Record Update/Transfer:** Submitted for change of member information (name, address, phone, status/rank, etc.).

**Date:** Complete as appropriate.

**Title/Rank:** Title (Mr., Mrs, Ms., Dr., etc.) or Military Rank, if Active Duty/Guard/Reserve (Amn, Sgt, Capt, etc).

**First Name/Middle Initial (MI)/Last Name:** Self explanatory.

**Address Line 1/Address Line 2:** Self explanatory.

Place "X" in the appropriate box to designate one of these addresses as primary method of notifications from TAI National.

**City (Base/APO/FPO) / State (Country) / Zip Code+Four (Post Code):** Complete as appropriate.

**Home/Office/Fax/Cell Phone:** Complete as appropriate.

**E-Mail Address:** Complete as appropriate.

Place "X" in the appropriate box to designate this address as primary method of notifications from TAI National.

**Military/Civilian Status:** Place "X" in appropriate boxes to identify current status:

**Designation/Classification:** Officer/Enlisted/Civil Service/No Military or Civil Service

**Branch of Service:** Air Force/Army/Coast Guard/Marines/Navy

**Status:** Active Duty/Guard/Reserve/Separated/Retired

**Highest Rank Held:** Current (or if separated/retired, highest) military rank held (Amn, SFC, CWO2, Capt, etc.).

**Military/Civilian Pay Grade:** Current (if separated/retired, highest) pay grade (E-1, O-3, GS-9, etc.) in military or civil service.

**Years of Service:** Self-explanatory.

**Other Memberships.** Place "X" in box(es) to identify membership in other listed organizations:

**OBAP** – Organization of Black Aerospace Professionals

**ROCKS** – The ROCKS, INC.

**IBAC** – International Black Aerospace Council

**NNOA** – National Naval Officers Association

**BCAF** - Bessie Coleman Aerospace Foundation

**MPMA** –Montford Point Marine Association

**BPA** – Black Pilots of America

**LINKS** - The Links, Inc.

**AFCOMAP** – AF Cadet Officer Mentor Action Program

**NSBE** - National Society of Black Engineers

**NAACP** - National Assoc for the Advancement of Colored People

**OTHER** [i.e., AF Sergeants Assoc. (**AFSA**), Non-Commissioned Officer Assoc. (**NCOA**), etc.)

**Print Full Name/Signature:** Applicant signs confirming intent to abide by Chapter and National directives

(Constitution/Bylaws) and provides authorization for use of personal information for backgrounds, as required. If signing for Organizational membership, they confirm their authority to enter into agreement on behalf of applicant organization.

**Membership Class:** Place "X" in appropriate box to identify/assign membership class.

**Regular:** Any applicant willing to work toward achievement of goals, objectives and purpose of TAI.

**Student:** (Formerly Youth) Applicant who is full-time student and under age of 25 interested in Tuskegee Experience.

**Organization:** Non or for-profit organization interesting in promoting, sponsoring or supporting objectives of TAI.

**Honorary:** Applicant previously approved for Honorary membership by TAI Board of Directors.

**Life:** Applicant who has been accepted and paid full fee (\$750.00) for National Life Membership.

**Membership Category:** Place "X" in appropriate box to identify/assign membership category.

**Experience:** Applicant assigned to Tuskegee Program, unit at TAAF, or resulting unit during Jan 1941 thru Sep 1949.

**Heritage:** Applicant is spouse or descendant of individual confirmed and assigned to/eligible for Experience category.

**Associate:** Applicant requesting membership and not eligible for inclusion in Experience or Heritage category.

### CHAPTER USE

**Chapter Name/Chapter Address:** Self-Explanatory.

**Region:** Place "X" in appropriate box to identify assigned region of chapter.

**Date Received:** Complete with date application (and dues) received.

**Amount Received:** Complete with amount paid for chapter dues and National per capita dues (as applicable).

**Received by:** Chapter official signs certifying receipt of application (and dues).

### NATIONAL USE

#### **National Office Processing**

**Date Received:** Complete with date application (and dues) received.

**Amount Received:** Complete with amount paid for chapter dues and National per capita dues (as applicable).

**Received by:** Chapter official signs certifying receipt of application (and dues).

#### **Membership Processing**

**Date Received:** Complete with date application (and dues, as applicable) received.

**Tuskegee Airmen Identification Number (TAIN):** Complete on initial assignment (Entered by Chapter for renewals).

**Date Forwarded to Member:** Date processing completed and document(s) sent to member.

**\* TAI does not provide member information or email addresses to any external organization without prior consent \***