



Royal Canadian Air Force Association
427 (London) Wing, 2155 Crumlin Road, London, ON N5Z 3Z9
519-455-0430

Regular Member _____ Associate Member _____
 (Please Check One)

Name: _____
 Surname Given Name Name Used Date

Full Address: _____
 Apt. # Street # and Name City Province Postal Code

Phone: _____ Email: _____ Date of Birth: _____
 (year/mth/day)

Next of Kin: _____ Relationship: _____
 Name & Address if Different

Occupation: _____ Employer: _____
 Formerly, If Retired

Former Wing Member? _____
 Wing # Year Other Organizations

INTEREST SURVEY

Circle those that apply: Committee Work, Museum, Fundraising, Events, Friday Luncheons, Cards, Golf

Other Interests/Ideas: _____ How did you hear about us? _____

Former Military Service: Air Cadets: RCMP (If Applicable):

Component: _____ Dates of Service: _____
 From To

Medals/Decorations: _____

I certify that the information provided is correct, and I agree to abide by the Bylaws and House Directives of 427 (London) Wing of the Royal Canadian Air Force Association.

NOTE: Your signature provides your consent allowing 427 (London) Wing to share your contact information with other Association members ONLY for the purposes of conducting Association business. Please provide your preferred method of communication for renewal notices, event updates, and other Wing business. Email _____ Phone _____ I do not wish to be contacted. _____ (You can change or cancel anytime.)

Applicant's Signature: _____ Sponsor: _____ Regular _____ Associate _____
 (\$96) (\$72)

Membership fees MUST be included with application. (Wing year is: July 1 - June 30)

Payment accepted by: Cheque _____ Cash _____ Debit/Visa/MasterCard _____ eTransfer to: info@427wing.com

FOR 427 (LONDON) WING USE ONLY:

Approval of Wing Executive Board (Date) _____ Induction Date: _____ Snowball: _____

Membership Board _____ Name Badge (\$12) _____