

Missouri National Guard Association Auxiliary

2010 Membership Form

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell: _____

E-Mail Address: _____

Spouse's Name and Rank: _____

Spouse's Unit: _____

Enclose:

\$10 Regular Membership _____ or \$10 Associate Membership _____

<p style="text-align: center;">Missouri National Guard Auxiliary Auxiliary Membership 2010</p> <p>This is to certify that</p> <hr/> <p>is a member in good standing MONGA Auxiliary</p> <hr/> <p>1st Vice President</p> <p>“Side by Side We Stand With Pride”</p>	<p>Send completed application and \$10.00 dues payable to MONGA Auxiliary to</p> <p>Debbie Cheshire MONGA Auxiliary 1719 Green Meadow Dr. Jefferson City, MO 65101</p>
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