ARMY 250th / AUSA 75th CELEBRATION RATES

ASSOCIATION OF THE UNITED STATES ARMY

MEMBERSHIP APPLICATION

☐ NEW ☐ RENEWAL # _____

* Required

RANK/PREFIX*	FIRST NAME*	M.I.	LAST NAME*	DATE OF BIRTH (MO/YR)

STREET ADDRESS*	CHAPTER

CITY*	STATE/ COUNTRY*	ZIP*

PRIMARY E-MAIL (AVOID USING A .MIL ADDRESS)*	PRIMARY PHONE*	MAGAZINE SUBSCRIPTION PREMIUM ONLY ☐ Print ☐ Digital

AUSA prohibits applying for membership with a false identity and reserves the right to cancel such memberships. By completing this application, I certify that my information is true and accurate, that I will abide by AUSA's bylaws, and that I consent to regular contact from AUSA and its affiliates per AUSA's data protection policy.

SIGNATURE* _____ DATE _____

MEMBERSHIP RATES (Discounted rates expire 12/31/2025)

PREMIUM				BASIC
☐ Life ~~$400~~ $250	☐ 5 Year ~~$75~~ $50	☐ 2 Year ~~$40~~ $30	☐ 2 Year $10 E1-E4 and Cadets	☐ 2 Year FREE

METHOD OF PAYMENT (PREMIUM ONLY)

TOTAL $_____

☐ Life Member payment plan ($62.50/mo for 4 months - credit card only)

☐ Credit Card ☐ Check or Money Order ☐ Cash_____ (Received By)

Card no. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Card Expires MO / YR ☐☐☐☐ CVV ☐☐☐☐

☐ **OPT IN** TO AUTO-RENEWAL AT STANDARD RATES – CREDIT CARD ONLY

SIGNED UP BY _____

RELATIONSHIP TO THE ARMY *(Check all that apply)*

☐ Regular Army	☐ Other U.S. Armed Services	☐ Veteran	☐ Cadet
☐ National Guard	☐ Retired Soldier	☐ Engaged Citizen	☐ Military Family
☐ Army Reserve	☐ Retired Other U.S. Armed Services	☐ Foreign Military	☐ Other:
☐ Army Civilian (☐ SES/ES/ST)	☐ Retired Government	☐ Foreign National	_____

Updated 4/25

SEND COMPLETED APPLICATION

MAIL: 2425 Wilson Blvd, Arlington, VA 22201 **EMAIL:** membersupport@ausa.org **CALL:** 855-246-6269