

## MEMBERSHIP APPLICATION AND DATA FORM

Association of the Century, Inc  
P.O. Box 34393  
Louisville, KY 40232  
Web site: [www.the-century.org](http://www.the-century.org)

Full Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip \_\_\_\_\_ Email Address: \_\_\_\_\_

### **Military Status:**

ACTIVE (\_\_\_\_) FORMER 100<sup>th</sup> DIVISION MEMBER (\_\_\_\_) RETIRED MIL (\_\_\_\_)  
Number of Years Served: \_\_\_\_\_

If Currently Assigned to the 100<sup>th</sup> Division:

Rank: \_\_\_\_\_ Unit of Assignment \_\_\_\_\_

If Past or Retired Member of the 100<sup>th</sup> Division:

Rank: \_\_\_\_\_ Last Unit of Assignment \_\_\_\_\_

Applying for Associate Membership (\_\_\_\_)

**Dues:** (Annual dues are not prorated and are due on January 1<sup>st</sup> of each year – Make check payable to The Association of the Century (AOC) and mail to above address)

I submit the above information for the reason checked below:

1. (\_\_\_\_) Applying for an Annual AOC Membership: New (\_\_\_\_) or Renewal (\_\_\_\_)  
Annual Dues of \$15.00 are enclosed
2. (\_\_\_\_) Applying for a Lifetime AOC Membership:  
(\_\_\_\_) \$160.00 Single Payment or (\_\_\_\_) Four Annual Payments of \$40.00 ea.
3. (\_\_\_\_) Applying for Associate AOC Membership: New (\_\_\_\_) or Renewal (\_\_\_\_)  
Annual Dues of \$ 15.00 are enclosed

I will promote the Association of the Century and will comply with its By-Laws. I hereby authorize my contact information to be reproduced and disseminated to other members of the Association and to others as deemed appropriate.

I would prefer to receive all future correspondence and newsletters from the Association via E-Mail:

Yes (\_\_\_\_) No (\_\_\_\_)

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