



KLSA Membership Form 2017-2018

Name:	Birthday (mm/dd):
Mailing Address:	
Home Address:	
Home/Cell Telephone:	Spouse's Name:
Email Address:	Previous Duty Station:
Organization:	DEROS (mm/yy):
New Member: Yes or No	Member Since:

Annual membership is \$20 for spouses E1-E4 (June 1 – May 31)
 Annual membership is \$40 for spouses E5 - above and Civilians (June 1 - May 31)
 Membership costs will be half price between January 1 - May 31.

Payment options include:
 Drop off this form and cash or check to the Landstuhl Thrift Shop, Bldg 3818 (On LRM behind CDC #1), 06371-867-313.
 Hours: Wednesdays 1300-1800; Thursdays and Fridays 1100-1630; 2nd Saturday of the month 1000-1500.

Or, bring this and payment to the next KLSA social functions. <http://www.klsagrapevine.org/> or find us on Facebook under <https://www.facebook.com/KLSAgrapevine/>.

*Privacy Act Statement: Kaiserslautern Landstuhl Spouses' Association (KLSA) has my permission to use the above information in the KLSA directory.

I consent I do not consent

*As a member of KLSA, do you hereby consent for the use of your photo/image in KLSA advertisements (i.e., website, Facebook, etc.)

I consent I do not consent

Signature: _____

For questions or additional information, please E-mail the KLSA Membership Chair at membership.klsa@gmail.com

For Official Use Only		
<i>Please do not fill out.</i>		
Date Paid _____	Check # _____	Cash _____
Month of Enrollment _____	Member Since _____	
Roster Date _____	Signature _____	