

# TUSKEGEE AIRMEN, INC. (TAI) MEMBERSHIP DATA/APPLICATION

Please mark the method (mailing address OR email address) you prefer for TAI to contact you with a X or checkmark.

PLEASE PRINT  
LEGIBLY

**NEW**

**RENEWAL**

**RECORD UPDATE/TRANSFER**

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

Title/Rank	First Name	MI	Last Name	Jr., Sr., etc.
Address Line 1		Receive ALL correspondence/voting ballots at this address <input type="checkbox"/>		
		Address Line 2		
City		State (Country)	Zip Code + Four (Post Code)	

Home Phone (    )	Office/Work Phone (    )	Fax Phone (    )	Cell/Mobile Phone/Other (    )
E-Mail Address			Receive ALL correspondence/voting ballots at this address <input type="checkbox"/>

<table style="width: 100%;"> <tr> <td style="width: 15%;">Officer (O1-O3)</td> <td style="width: 15%; color: blue;"><b>Air Force</b></td> <td style="width: 15%;"><b>Active Duty</b></td> <td style="width: 15%;"></td> </tr> <tr> <td>Officer (O4-Above)</td> <td style="color: green;"><b>Army</b></td> <td><b>Reserve/Guard</b></td> <td></td> </tr> <tr> <td>Enlisted</td> <td style="color: blue;"><b>Space Force</b></td> <td><b>Coast Guard</b></td> <td>ROTC</td> </tr> <tr> <td>Civil Svc</td> <td style="color: red;"><b>Marines</b></td> <td><b>Separated</b></td> <td></td> </tr> <tr> <td>No Mil/ Civil Svc</td> <td style="color: blue;"><b>Navy</b></td> <td><b>Retired</b></td> <td></td> </tr> </table>	Officer (O1-O3)	<b>Air Force</b>	<b>Active Duty</b>		Officer (O4-Above)	<b>Army</b>	<b>Reserve/Guard</b>		Enlisted	<b>Space Force</b>	<b>Coast Guard</b>	ROTC	Civil Svc	<b>Marines</b>	<b>Separated</b>		No Mil/ Civil Svc	<b>Navy</b>	<b>Retired</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 40px;">Highest Rank Held</td></tr> <tr><td style="height: 40px;">Mil/Civ Pay Grade</td></tr> <tr><td style="height: 40px;">Years of Svc</td></tr> </table>	Highest Rank Held	Mil/Civ Pay Grade	Years of Svc	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">OTHER MEMBERSHIPS</th> </tr> <tr> <td>OBAP</td> <td>AFCOMAP</td> <td>NAACP</td> </tr> <tr> <td>BPA</td> <td>ROCKS</td> <td>LINKS</td> </tr> <tr> <td>BCAF</td> <td>NNOA</td> <td>AFA</td> </tr> <tr> <td>NSBE</td> <td>MPMA</td> <td>_____</td> </tr> <tr> <td>Afsa</td> <td>NCOA</td> <td>_____</td> </tr> </table>	OTHER MEMBERSHIPS			OBAP	AFCOMAP	NAACP	BPA	ROCKS	LINKS	BCAF	NNOA	AFA	NSBE	MPMA	_____	Afsa	NCOA	_____
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I agree to abide by the Constitution and By-Laws of the Chapter and of Tuskegee Airmen, Inc. (TAI) and I authorize TAI to use my personal information in conjunction with my participation in Youth activities, as required.

<b>Signature</b>	I certify the <b>Typed Signature</b> or <b>X</b> in this block is solely the person applying for Chapter Membership.
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**MEMBERSHIP CATEGORY (Select Only One)**

<input type="checkbox"/>	Assigned to Tuskegee Army Air Corps Program; unit at Tuskegee Army Airfield; or unit growing out of Tuskegee Experience, from Jan 1941 through Sept 1949. ( <b>Experience - TE</b> )
<input type="checkbox"/>	Is spouse or descendent of an Experience Category (TE) member. ( <b>Heritage - TH</b> )
<input type="checkbox"/>	Is Brother/Sister/Niece/Nephew/Cousin, etc. of a TE member. ( <b>Kindred - TK</b> )
<input type="checkbox"/>	Is a member of Tuskegee Airmen, Inc. in category other than TE/TH/TK. ( <b>Associate - TA</b> )

**MEMBERSHIP CLASS**

<input type="checkbox"/>	<b>REGULAR (R)</b>
<input type="checkbox"/>	<b>STUDENT (S)</b>
<input type="checkbox"/>	<b>LIFE (L)</b>
<input type="checkbox"/>	<b>HONORARY (H)</b>
<input type="checkbox"/>	<b>Organization (O)</b>

FOR CHAPTER USE		
Chapter Name: _____		
Official Chapter Address _____		
Eastern	Central	Western
Date Received _____		
Amt Received Chapter: \$ _____ Nat'l: \$ _____		
Received by (Signature) _____		

FOR NATIONAL USE	
<b>National Office Processing Date</b>	
Received	_____
Amt Received \$	_____
Received by (Signature)	_____
<b>Membership Processing</b>	
Date Received	_____
Tuskegee Airmen Identification Number	_____
Date Fwd. to Mbr	_____

For Renewals, Chapter Fill-In TAI Number

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## TUSKEGEE AIRMEN, INC. (TAI) MEMBERSHIP DATA/APPLICATION INSTRUCTIONS

**Application Action:** Place "X" in appropriate box(es) to identify purpose of application:

**New:** First-time applicant (or previous member with more than 1-year lapse in financial membership).

**Renewal:** Current financial member submitting application for next membership year.

**Record Update/Transfer:** Submitted for change of member information (name, address, phone, status/rank, etc.).

**Date:** Complete as appropriate.

**Title/Rank:** Title (Mr., Mrs., Ms., Dr., etc.) or Military Rank, if Active Duty/Guard/Reserve (Airmen, Sgt, Capt., etc.).

**First Name/Middle Initial (MI)/Last Name:** Self-explanatory.

**Address Line 1/Address Line 2:** Self-explanatory.

Place "X" in provided box to select **ONLY** this address to receive **ALL** correspondence/voting ballots from TAI (REVISED).

**City (Base/APO/FPO) / State (Country) / Zip Code Four (Post Code):** Complete as appropriate.

**Home/Office/Fax/Cell Phone:** Complete as appropriate.

**E-Mail Address:** Complete as appropriate.

Place "X" in provided box to select **ONLY** this address to receive **ALL** correspondence/voting ballots from TAI (REVISED).

**Military/Civilian Status:** Place "X" in appropriate boxes to identify current status:

**Designation/Classification:** Officer/Enlisted/Civil Service/No Military or Civil Service

**Branch of Service:** Air Force/Army/Space Force/Coast Guard/Marines/Navy

**Status:** Active Duty/Guard/Reserve/Separated/Retired

**Highest Rank Held:** Current (or if separated/retired, highest) military rank held (Airmen, SFC, CWO2, Capt., etc.).

**Military/Civilian Pay Grade:** Current (if separated/retired, highest) pay grade (E-1, O-3, GS-9, etc.) in military or civil service.

**Years of Service:** Self-explanatory.

**Other Memberships.** Place "X" in box(es) to identify membership in other listed organizations:

**OBAP** – Organization of Black Aerospace Professionals

**IBAC** – International Black Aerospace Council

**BCAF** - Bessie Coleman Aerospace Foundation

**BPA** – Black Pilots of America

**AFCOMAP** – AF Cadet Officer Mentor Action Program

**NAACP** - National Assoc for the Advancement of Colored People

**OTHER** [i.e., AF Sergeants Assoc. (**AFSA**), Non-Commissioned Officer Assoc. (**NCOA**), etc.]

**ROCKS** – The ROCKS, INC.

**NNOA** – National Naval Officers Association

**MPMA** –Montford Point Marine Association

**LINKS** - The Links, Inc.

**NSBE** - National Society of Black Engineers

**AFA** - Air Force Association

**Print Full Name/Signature:** Applicant signs confirming intent to abide by Chapter and National directives

(Constitution/Bylaws) and provides authorization for use of personal information for backgrounds, as required. If signing for Organizational membership, they confirm their authority to enter into agreement on behalf of applicant organization.

**Membership Class:** Place "X" in appropriate box to identify/assign membership class. (**Dues Amount reflects National only**)

**Regular:** Any applicant willing to work toward achievement of goals, objectives and purpose of TAI. (**National: \$50.00**)

**Student:** (Formerly Youth) Applicant who is full-time student and underage of 25 interested in Tuskegee Experience. (**Nat'l: \$35.00**)

**Life:** Applicant who has been accepted and paid full fee (\$750.00) for National Life Membership. (**or \$250.00 for 3-Years to Nat'l**)

**Honorary:** Applicant previously approved for Honorary membership by TAI Board of Directors. (**Nat'l: \$50.00**)

**Organization:** Non or for-profit organization interesting in promoting, sponsoring or supporting objectives of TAI. (**Nat'l: \$50.00**)

**Membership Category:** Place "X" in appropriate box to identify/assign membership category.

**Experience:** Applicant assigned to Tuskegee Program, unit at TAAF, or resulting unit during Jan 1941 thru Sep 1949.

**Heritage:** Applicant is spouse or descendant of individual confirmed and assigned to/eligible for Experience category.

**Kindred:** Applicant is a Brother, Sister or Relative of individual confirmed and assigned to/eligible for Experience category.

**Associate:** Applicant requesting membership and not eligible for inclusion in Experience, Heritage or Kindred category.

### CHAPTER USE

**Chapter Name/Chapter Address:** Self-Explanatory.

**Region:** Place "X" in appropriate box to identify assigned region of chapter.

**Date Received:** Complete with date application (and dues) received.

**Amount Received:** Complete with amount paid for chapter dues and National per capita dues (as applicable).

**Received by:** Chapter official signs certifying receipt of application (and dues).

### NATIONAL USE

#### **National Office Processing**

**Date Received:** Complete with date application (and dues) received.

**Amount Received:** Complete with amount paid for chapter dues and National per capita dues (as applicable).

**Received by:** Chapter official signs certifying receipt of application (and dues).

#### **Membership Processing**

**Date Received:** Complete with date application (and dues, as applicable) received.

**Tuskegee Airmen Identification Number (TAIN):** Complete on initial assignment (Entered by Chapter for renewals).

**Date Forwarded to Member:** Date processing completed, and document(s) sent to member.

**\* TAI does not provide member information or email addresses to any external organization without prior consent \***