



"CON ORGULLO EN NUESTRA HISPANIDAD"
WITH PRIDE IN OUR HISPANIC HERITAGE

RETIRED MEMBERSHIP APPLICATION

FULL NAME	
PERSONAL EMAIL ADDRESS:	
MAILING ADDRESS:	
PHONE NUMBER:	
PRIOR JOB TITLE/SERIES:	
PRIOR REGION/SERVICE CENTER	
PRIOR DUTY LOCATION:	
HOW WERE YOU RECRUITED (i.e. 1:1, recruitment drive, etc)	
SIGNATURE and DATE:	

WHERE TO SEND: Email application to membership@nhcfae.org . In Person Checks are accepted. Payment can also be made through Paypal to : www.paypal.me/nhcfae

your new membership package!

