



**Organization Dues Statement**

**Active Duty 509<sup>th</sup> PIA Membership . . \$25.00**

*Please make check payable to:*

**509<sup>th</sup> PIA**

*and send to:*

**509<sup>th</sup> Parachute Infantry Association**

**Barry Simpson, Treasurer**

**P.O. Box 860**

**Huntsville, AL 35804**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Company: \_\_\_\_\_ Time Period: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE NOTE THAT THIS MEMBERSHIP IS GOOD FOR AS LONG AS YOU ARE ON ACTIVE DUTY AND CONTINUES FOR ONE YEAR AFTER YOU SEPARATE FROM THE SERVICE. PLEASE NOTIFY THE ASSOCIATION OF ALL CHANGES OF YOUR E-MAIL ADDRESS AND YOUR STATUS.