

The National Counter Intelligence Corps Association



NCICA
1185 Bastion Circle
Mount Juliet, TN 37122-6148



MEMBERSHIP APPLICATION

First Name _____ Middle Initial _____ Last Name _____

Mailing Address _____ Street & No _____ City, State _____ Zip Code _____

Business or Occupation _____ Firm Name _____ Address _____

Life @ \$200 () _____ 2-year \$35 () _____

Type Membership (Make check payable to NCICA)

E-Mail Address (Print clearly) _____ () _____ Telephone _____

Date of Birth _____ Place of Birth _____ Serial Number _____

Last Period of CIC or any Intelligence Corps Service of any Branch of U.S. Military Service _____

Last CIC or Intelligence Corps Units in which you served in any U.S. Military Service _____

Date and place of Discharge _____ Type of Discharge _____

New member () _____ Renewal () _____

Verification of my Service Record as stated above is authorized to be furnished to the NCICA or its Agent by the Department of the Army as per Par 5b (6) (b) AR 37-30.

Signature _____ Date _____

Membership Committee Action _____ Date _____

Officially Recorded on Records by _____ Date _____

Eligibility requirements : Photo copies of appropriate Documentation showing service in units as described in the eligibility section of the By-Laws **MUST** be furnished. Usually Military Form (Release) DD214 is adequate.