

Fort Carson Officers' Spouses' Club Membership Application

Data required by the Privacy Act of 1974

AUTHORITY: U.S. Code, Title X, Section 3012
PRINCIPLE PURPOSE: Identification of Individuals who apply for FCOSC membership. Used to register new members and monitor participation in FCOSC programs.
DISCLOSURE: Disclosure is voluntary. Failure to provide information may result in denial of membership in FCOSC.

NAME _____

ADDRESS _____ CITY _____ ZIP _____

PHONE NUMBER _____ BIRTHDATE _____

SPOUSE'S NAME _____ RANK/UNIT _____

Signature implies that in accordance with Army Regulation 340-21, I authorize publication of my name, address, phone number, email, and spouse information in FCOSC rosters, directories, and newsletters.

EMAIL _____ SIGNATURE _____

Payment information on reverse

I would like to advertise my home business in the monthly newsletter.

____ YES ____ NO

I would you like to participate on a committee, special project, or fundraiser. (Circle one or all)

I would like to teach a class on:

I would like more info on CDC childcare for monthly OSC functions

____ YES ____ NO

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Yearly Dues are \$20.00/ Retirees \$10
Please make checks payable to FCOSC
Mail application and membership fee to:
FCOSC-MEMBERSHIP
PO BOX 12886
FORT CARSON, CO 80913

For Internal Use Only
Date _____
Received by _____
Cash _____
Check # _____

Reservation Policy: Monthly and permanent reservations apply to all day or night general membership functions only. Any person who has made a reservation and fails to attend or cancel their reservation three days prior to the function will be responsible to pay for the cost of the function. Permanent Reservations will be automatically charged to the account below the day of the function unless cancelled. Emergencies will be handled on a case-by-case basis through the Reservation Chairperson.

Credit Card MC/Visa # _____ ExpDate _____

Signature _____

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