THE MILITARY COALITION
PROUDLY SERVING ALL EIGHT UNIFORMED SERVICES

Membership Application for The Military Coalition (TMC)

[Please print or type. Use separate sheet of paper if necessary]

1. FULL NAME AND ADDRESS OF YOUR ORGANIZATION:

2. PURPOSE OR MISSION OF YOUR ORGANIZATION (Please quote directly from your organization's constitution or bylaws):

3. FOUNDING DATE:

4. IRS CODE:

5. IF INCORPORATED, PLEASE PROVIDE INCORPORATION INFORMATION:
   Date_____
   City/State_____

6. NUMBER OF MEMBERS IN YOUR ORGANIZATION:

   INDIVIDUAL MEMBERS_____

   CORPORATE MEMBERS_____

7. WHAT ARE YOUR ORGANIZATION'S PRIMARY SOURCES OF REVENUE?

8. LOCATION OF NATIONAL HEADQUARTERS (Please provide full address, telephone and fax numbers, and e-mail address):

9. ADDRESS OF WASHINGTON DC-AREA BUSINESS OFFICE (Per Article V, subparagraph 5.1.c. of the TMC bylaws, a local business office and at least one full-time paid employee are prerequisites for TMC membership):

10. CONTACT INFORMATION FOR CEO/COO/Pres. (Please provide name, full address, telephone and fax numbers, and e-mail address):

11. PRINCIPAL CONTACT AT WASHINGTON DC-AREA BUSINESS OFFICE (Please provide name, full address, telephone and fax numbers, and e-mail address if different from 9 above):

12. OTHER ORGANIZATION REPRESENTATIVES WHO WOULD ATTEND OR PARTICIPATE IN TMC MEETINGS/COMMITTEES/ACTIVITIES: (Use separate sheet of paper if necessary. Please provide same information as required in item 10 above)

13. HOW WILL YOUR ORGANIZATION CONTRIBUTE TO THE ACTIVITIES AND MISSION OF TMC?

14. PICK WHICH MEMBERSHIP YOU ARE APPLYING FOR (Please see Article III – "Membership Categories," of the TMC bylaws for membership category definitions): You may select either "Supporting Organization" or "Affiliate Organization."

15. AGREEMENT TO BECOME A SUPPORTING ORGANIZATION IN TMC. We understand and agree that, per Article III, paragraph 3.2 of the TMC bylaws, all newly approved applicants must spend one year as a "Supporting Organization" (Per Article III, paragraph 3.3, Affiliate Memberships do not provide a pathway to Full Membership). At the end of one year, a Supporting Organization may apply for regular Full TMC membership in accordance with Article V, paragraph 5.3

16. AGREEMENT TO TMC PARTICIPATION.

A. We understand that the strength of the Coalition arises from joint support of members' common goals, and that the expectation is that Coalition Members and Supporting Organizations will work in a united way to support the full range of Coalition goals for the entire uniformed services and veterans community, and not just those elements that specifically affect our organization's members. In supporting each other's goals, each Coalition organization gains by broadening support for its own goals.

B. We understand and agree that a member of the organization must attend at least four of every six monthly TMC meetings.

C. We agree that at least one member of the organization shall participate as a member of at least one of TMC's Standing Committees:

Guard and Reserve
Military Personnel
Health Care
Retired Affairs
Survivor Programs
Taxes/Social Security
Veterans

17. ACCEPTANCE OF TMC MEMBERSHIP AGREEMENT AND BYLAWS: I HEREBY AFFIRM THAT I HAVE READ AND UNDERSTAND BOTH THE MILITARY COALITION'S MEMBERSHIP AGREEMENT AND BYLAWS. IF ACCEPTED FOR MEMBERSHIP, OUR ORGANIZATION RESOLVES TO ABIDE BY THOSE BYLAWS.

Signature of CEO/COO/President _____

DATE: _____

PRINT NAME AND TITLE:_____

Please submit completed applications to the TMC Secretary by **e-mail (preferred)** or by mail to:

TMC Secretary
The Military Coalition
201 N Washington Street
Alexandria, VA 22314-2539

TMC BYLAWS: http://www.themilitarycoalition.org/tmc-bylaws.html