

**RETIRED AIR FORCE OFFICERS ASSOCIATION. (RAFOA)**

c/o Sri Lanka Air Force, P.O. BOX 594, Colombo.

**Application form for membership**  
as per Section 3 of the constitution

**1. Name in Full :**.....

**2. Rank :**.....

**3. Address :** .....  
.....  
.....

**Tele:** ..... ..

**4. Present Occupation. (If Any)** .....

**5. Regular/Volunteer.**                      **Service No:**..... **NIC Number:**.....

**6. Date of Commissioning:** .....                      **Branch:** .....

**7. Date of Retirement/Leaving:**.....

**8. I enclose cash** ..... **Cheque No:** .....  
**For** .....

Enrollment Fee Rs:1000/= Full membership.  
" " Rs: 500/= Associate membership.  
Membership Fee Rs: 250/= Per year. For both categories  
Life membership Rs: 1000/= For both categories.

**Please make cheques to “Retired Air Force Officers Association”.**

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**Signature of Applicant**