



# XV SQN ASSOCIATION

## MEMBERSHIP APPLICATION ASSOCIATE MEMBER

*Name*

*My relative*

*Dates served on Sqn*

*Aircraft Type*

*Branch/Trade*

*Address*

*Post code*



*email*

*Tick box if you would like to receive all correspondence via email.*

*I enclose a cheque for £15 made payable to 'XV Sqn Association', which entitles me to lifetime membership of the Association, a copy of the annual newsletter and the option of attending the annual reunion dinner.*

*signed*

*date*

✉ *Please send application form and cheque to:*

*XV Sqn Association Secretary  
XV(R) Sqn  
RAF Lossiemouth  
Moray  
IV31 6SD*