THE CALGARY NAVAL VETERANS' ASSOCIATION

2402 2A Street SE, Calgary, Alberta, T2G 2S1
Phone (403) 261- 0530 email: info@cnva.ca

MEMBERSHIP APPLICATION

FIRST NAME: ..... LAST NAME: .....

ADDRESS: .....

CITY: ..... PROVINCE: ..... POSTAL CODE: .....

TELEPHONE #: ..... EMAIL: .....

SPOUSE OR SIGNIFICANT OTHER: .....

VEHICLE MAKE…… LICENCE PLATE #……..

NAVAL/MILITARY SERVICE INFORMATION

COUNTRY(S) SERVED UNDER: ..... DATES SERVED: .....

RANK: ..... NAVY: ☐ AIR: ☐ ARMY: ☐ MERCHANT NAVY: ☐...

MILITARY TRADE: ..... CIVILIAN OCCUPATINON: .....

SHIPS SAILED IN OR DUTY UNIT:

I hereby certify the above information is correct and wish to be a member of The Calgary Naval Veterans Association. I also agree to abide by the Constitution of the Royal Canadian Naval Association and Rules and Bylaws of The Calgary Naval Veterans Association. Further, I understand any information collected is specifically for the use of the Calgary Naval Veterans Association to communicate with members and will not be shared with any other organization without my written consent.

Applicant: ..... DATE: .....

Sponsor: ..... DATE: .....

OFFICE USE ONLY

APPLICATION APPROVED: ..... DATE: .....

MEMBERSHIP FEE OF: ..... RECIEVED.....

MEMBERSHIP TYPE: REGULAR ..☐... ASSOCIATE ..☐... RCNA CARD # ..... RCNA PIN: .....
(Rev:Sept. 06, 2026)