



Fairchild PT-23

Commemorative Air Force Jayhawk Wing

2560 S. Kessler - Wichita, KS 67217

www.cafjayhawks.org



Cessna UC-78

Welcome to the Commemorative Air Force / Jayhawk Wing

Getting Started...

STEP 1

Fill out the Commemorative Air Force application.

STEP 2

Fill out the CAF Jayhawk Wing application.

FIRST YEARS DUES ARE WAVED WHEN JOINING THE COMMEMORATIVE AIR FORCE

STEP 3

If paying by check, please make your check payable to:

COMMEMORATIVE AIR FORCE In the amount of \$200.00.

If bank draft – please fill out “Deduction Authorization” form.

STEP 4

Please use envelope provided to help us serve you better. Include your application and payment.

Or mail applications with payment to:

CAF Jayhawk Wing

Col Herb Duncan – Membership

814 N. Colorado

Wichita, KS 67212

Once we receive your application and payment, we will start membership process.

Questions:

Col Herb Duncan - 316-259-3990 - cafjayhawks@gmail.com

Honoring American Military Aviation



COMMEMORATIVE AIR FORCE

P.O. Box 62000
MIDLAND, TX 79711-2000
(432) 563-1000 • FAX (432) 563-8046
TOLL FREE (877) 767-7175
www.commemorativeairforce.org
www.airsho.org

OFFICE USE ONLY

Recommended by Col Herb Duncan 29496

Unit Credit CAF Col JAYHAWK WING Serial No. _____

Date Received _____

Serial No. _____

APPLICATION FOR COMMISSION

NAME _____

MAILING ADDRESS _____

(City) _____ (State) _____ (Zip) _____
HOME PHONE _____ BUSINESS PHONE _____

CELL _____ EMAIL _____

PROFESSION _____ COMPANY & TITLE _____

IF RETIRED, PAST PROFESSION _____ COMPANY _____

DATE OF BIRTH _____ MARRIED _____ IF YES, SPOUSE'S NAME _____

Please list aviation related skills, business skills, historical/museum skills _____

List CAF members, if any, with whom you are acquainted _____

Do you wish to affiliate with a CAF Unit? YES If yes, which Unit? JAYHAWK WING - WICHITA, KS

Print name as you would like it to appear on name tag _____

OBJECTIVES OF THE COMMEMORATIVE AIR FORCE

- To acquire**, restore, and preserve in flying condition a complete collection of combat aircraft which were flown by all military services of the United States, and selected aircraft of other nations, for the education and enjoyment of present and future generations of Americans.
- To construct** or obtain museum buildings for the permanent protection, maintenance, and display of these historic aircraft, period artifacts, and documents as a tribute to the thousands of men and women who built, serviced, and flew them and to build and organize the "Combat Airman Hall of Fame."
- To perpetuate** the spirit in which such combat aircraft were flown in the defense of our nation, in the memory and hearts of all Americans.
- To establish** an organization having the dedication, enthusiasm, and Esprit de Corps necessary to operate, maintain, and preserve these aircraft as symbols of our American Military Aviation Heritage.

Payment Information

- **Please remit a total of \$200.00 with this application. Annual dues are \$200.00**

MasterCard/VISA/Discover/American Express # _____ Expires _____

Annual membership dues of \$200.00 include \$30.00 for a 1-year subscription to Dispatch magazine. If you do not wish to receive Dispatch please check here. (Membership dues will remain \$200.00)

- **Bank Draft Option: (US Only) Please remit \$19.00 with this application. \$19.00 will be drafted from your account monthly upon receipt of a Bank Draft form. If a form is not attached to this application, please request one.**

Life Membership

Life membership contribution is \$2,400.00.

- \$2,400.00 is enclosed.**

Deferred Life Membership ~

- \$200.00 is enclosed and I will remit 200.00 monthly for 11 months.**
- Charge the above credit card \$200.00 monthly for 12 months.**

The COMMEMORATIVE AIR FORCE is a self-supporting, all-volunteer organization. It is non-profit, tax-exempt and incorporated under the laws of the State of Texas for charitable and educational purposes. You do not need to be a pilot or military veteran to become a member of the CAF. Candidates must be 18 years of age or older.

I certify that the statements made by me in this application are true, to the best of my knowledge and belief, and are made in good faith. I will give my full support to the aims and objectives of the COMMEMORATIVE AIR FORCE and will assist the General Staff in attaining these goals.

_____ Date _____
Applicant's Signature

Please provide this additional information if applicable

Are you a pilot? _____ Total flying hours _____ What aircraft types have you flown? _____

Certificate: Student Private Commercial ATR

Ratings: _____

If you served in the Armed Forces, which branch and what country? _____

Date of Service _____

CAF Aircraft Sponsor Program

The Sponsor Program makes this collection of airplanes possible and is largely responsible for their continued preservation. Those who sponsor the aircraft will have the privilege of serving as ground or flight crew members if they wish and can qualify. Costs of sponsorships range from \$150.00 to \$10,000.00. You do not need to be a pilot or mechanic to sponsor an aircraft or participate in its operation. For more information, please call Headquarters at 432-563-1000.



HEADQUARTERS
 PO Box 62000
 Midland, TX 79711-2000
 (432) 563-1000 ☛ Fax (432) 563-8046
 Toll Free (877) 767-7175
 www.commemorativeairforce.org

**COMMEMORATIVE AIR FORCE MEMBERSHIP DUES
 NEW DONATION DEDUCTION AUTHORIZATION (U.S. ONLY)**

MEMBER NAME _____ I.D. _____

APPLICATION DATE _____

BANK _____ CITY _____ STATE _____

ACCOUNT # _____

ABA ROUTING # _____

PLEASE CHECK ONE SAVINGS CHECKING

I hereby authorize you to deduct from my account \$19.00 on the 5th day of each month. I understand that this deduction shall cease: (1) upon termination of my membership, or (2) upon written notice by me to the Commemorative Air Force of the cancellation of this authorization, or (3) upon termination of this program by the Commemorative Air Force under which you have agreed to remit dues donations.

A new CAF member will be commissioned at the next General Membership meeting and will be eligible to vote beginning with the second General Membership meeting after his/her joining.

I understand this authorization may be terminated at the sole discretion of the Commemorative Air Force. This authorization supersedes all previous similar authorizations and is to be retained by the Commemorative Air Force.

I have remitted \$19.00 with this application. I understand that deductions from my account will start on the 5th day of the month immediately following Commemorative Air Force Headquarters receipt of my authorization.

SIGNATURE _____ DATE _____

THE CAF IS A PATRIOTIC ORGANIZATION DEDICATED TO THE PRESERVATION
 OF THE WORLD'S GREAT COMBAT AIRCRAFT

CONTRIBUTIONS TO THE CAF ARE TAX DEDUCTIBLE

FOR NEW DEDUCTION AUTHORIZATION

