



**Application for Membership  
in  
The EOD MasterBlasters, Inc.  
P.O. Box 1881  
Crestview, FL 32536-7881**



Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_  
(Last, First, Middle Initial)

Mailing Address (Please include 9-digit zip code, if known)\*: \_\_\_\_\_ E-Mail Address\*\*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone Number\*\*\*: \_\_\_\_\_ Work/Cell Phone Number: \_\_\_\_\_

\*Permission granted to publish my name/address in the Membership Roster/AF EOD Personnel Roster?  
YES \_\_\_\_\_ NO \_\_\_\_\_

\*\*Permission granted to publish my e-mail address in the Membership Roster/AF EOD Personnel Roster?  
YES \_\_\_\_\_ NO \_\_\_\_\_

\*\*\*Permission granted to publish my home phone no. in the Membership Roster/AF EOD Personnel Roster?  
YES \_\_\_\_\_ NO \_\_\_\_\_

Dates of Military Service: From: \_\_\_\_\_ To: \_\_\_\_\_ Date Graduated Basic EOD School: \_\_\_\_\_  
(dd/mm/yyyy) (dd/mm/yyyy)

EOD School(s) Attended: \_\_\_\_\_

Dates of EOD Service: From: \_\_\_\_\_ To: \_\_\_\_\_  
(dd/mm/yyyy)

Membership Category being applied for: \_\_\_\_\_ (Please see below)

**Membership Categories.**

- **Regular.** Eligibility for Regular membership requires that individuals must be (1) a retired or active duty member of the U.S. Air Force, or served honorably in the Air Force EOD career field, but did not retire and (2) a graduate of an accredited Bomb Disposal or Explosive Ordnance Disposal School (i.e., RAF Bomb Disposal School; Ordnance Bomb Disposal School, Aberdeen Proving Ground; or U.S. Naval School, Explosive Ordnance Disposal). Regular members may hold office in the association and vote on all association business matters.
- **Associate.** Other military-service EOD personnel who are graduates of schools defined in the above eligibility requirements, or any other person who is interested in EOD, may apply for Associate membership in the association. Associate members, however, are not be eligible to hold office in the association or vote on association business matters.
- **Surviving Spouse.** Spouses of deceased, retired Air Force EOD personnel may apply for membership in this category. Spouses of deceased members of The EOD MasterBlasters will be automatically enrolled in this membership category, upon the passing of the member spouse, unless the association Secretary is instructed to the contrary by the surviving spouse.) Surviving Spouse members, however, are not be eligible to hold office in the association or vote on association business matters. No dues are charged for this membership category, and attendance of annual reunion is at no cost.
- **Lifetime.** Association members who are either Charter, Regular or Associate members may convert their memberships to Lifetime Memberships by submitting the appropriate amount of Lifetime Member dues defined below. New Regular or Associate members may also join as Lifetime Members.
- **Corporate Sponsor.** Please contact association secretary for membership application or download form from [www.codmbi.com](http://www.codmbi.com) > membership info.

**Dues:**

- **Annual Dues:** (Regular/Associate Members):
  - **Single Payment (By Year): \$25.00 per year.** Please make checks payable to The EOD MasterBlasters. (Dues include a copy of the current issue of the Air Force EOD Personnel Roster/Association Membership Listing and update, and copies of association Newsletter [The HellBox Times], when published, normally twice annually).
  - **3-Year Package:** \$60.00 (includes dues for current year, plus two years advanced paid dues (beginning 1 Jan. 2009, and must be current for 2008), at a package rate of \$20.00 per year.
  - **Lifetime Dues:** Amounts for this category of membership are divided by age groups: Over 80-no cost; 71-80 years-\$150.00; 61/70-\$200.00; 51/60-\$250.00; and 50 years and below-\$300.00. These amounts may be paid in four quarterly installments.

Date of Birth (dd/mm/yyyy): \_\_\_\_\_ Current or Retired Grade or Rank: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date Signed (dd/mm/yyyy): \_\_\_\_\_

**For MBI Admin use:**

Entered in: Membership Rolls \_\_\_\_\_ Roster/Mailing List \_\_\_\_\_

Membership Certificate Prepared \_\_\_\_\_ Membership Card Prepared \_\_\_\_\_ Lapel Pin Issued \_\_\_\_\_