



AIRCRAFT MECHANICS FRATERNAL ASSOCIATION

National Office: 14001 E. Iliff Avenue, Suite 217 • Aurora, CO 80014
Tel: 303.752.AMFA (2632) • Fax: 303.362.7736

Replacement Membership Card Request Form

IMPORTANT: TYPE PRINT CLEARLY

Name: _____

Employee #: _____ AMFA #: _____

Mailing Address: _____

Contact Telephone #: _____

Email Address: _____

*****We strongly encourage you to use a personal email address, not a company provided email address.*****

Signature: _____

Directions to Submit This Form

1. Type your information into the above type-able field and print the form, or Print the blank form and fill out all of the above information.
2. Failure to provide all information requested may result in not receiving a card.
3. Sign the completed form.
4. Submit the form by fax to AMFA National (303) 362-7736 or Submit the form by email to: Elections@amfanatl.org
5. You should receive your replacement card in 7-10 business days.