

You can fill out an online version of this form at: www.cfmws.ca

Important: If you are a friend of the CF, phone 1-855-245-0330 for further information. Please do not fill out this form.

Person Details				
Last Name		First Name		Middle Name
Rank or Salutation	Date of Birth	Language	Gender	
	dd mm yyyy	<input type="checkbox"/> English <input type="checkbox"/> French	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> unspecified	
Category (select ONLY one)				
Current and Former CAF Member <input type="checkbox"/> Reg Force <input type="checkbox"/> Air Force <input type="checkbox"/> Res Class A/B <input type="checkbox"/> Army <input type="checkbox"/> Res Class C <input type="checkbox"/> Navy <input type="checkbox"/> CAF Veteran <input type="checkbox"/> Canadian Rangers <input type="checkbox"/> COATS		<input type="checkbox"/> Foreign Military	Family Member <input type="checkbox"/> Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Dependant <input type="checkbox"/> Guardian	Civilian <input type="checkbox"/> Serving and former (DND, NPF, DRDC, DCC, CSE) <input type="checkbox"/> Staff of Military Family Resource Centres <input type="checkbox"/> Honorary Col / Capt (N) and Honorary LCol / Cdr <input type="checkbox"/> Serving and retired RCMP <input type="checkbox"/> Serving and retired Canadian Coast Guard <input type="checkbox"/> CADETS <input type="checkbox"/> Jr. Canadian Rangers
Mailing Address				
Apt. No	Street Address			PO Box
City	Province	Country	Postal Code	
Residential Address (only complete if different from mailing address)				
Apt. No	Street Address			PO Box
City	Province	Country	Postal Code	
Phone / Email				
Home	Cell (optional)	Work (optional)	Ext.	
Email		Secondary Email (optional)		
Terms of Use / Agreements				
<input type="checkbox"/> I have read and agree to the collection and use of my personal information as outlined in the CFMWS Privacy Policy , available at www.cfmws.ca		Signature	Date dd mm yyyy	
Individuals under the age of 18 (this section must be completed by parent or legal guardian)				
Parent or Legal Guardian (print your name)		Signature	Relationship with Applicant	Date dd mm yyyy
			<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian	

Section 1 – Category Groups

Step 1: Insert a checkmark next to the category group that applies to you. You can select more than one code.

For example, you could be a 'Veteran with pension' but also a 'DND Public Servant'.

If you selected two or more codes, the one closest to the top of the list is your primary code.

For example, if you selected 'V' and 'D', then 'V' is your primary code.

Code	Category Group
<input type="checkbox"/> CF	Regular Force or Reserve Force Member (Class A/B) and (Class C)
<input type="checkbox"/> CF-F	Family of Regular Force Member or Reserve Force Member (Class A/B) and (Class C)
<input type="checkbox"/> V	Veteran (Former Member of the CAF) with pension
<input type="checkbox"/> V	Veteran (Former Member of the CAF) without pension
<input type="checkbox"/> V-F	Family of Veteran (Former Member of the CAF)
<input type="checkbox"/> V-F	Family of the Deceased
<input type="checkbox"/> FF	Member of Foreign Military currently serving with the CAF
<input type="checkbox"/> FF-F	Family of Member of Foreign Military currently serving with the CAF
<input type="checkbox"/> D	Current Staff of the NPF, MFRC, DND, DRDC, DCC, CSE
<input type="checkbox"/> D	Serving RCMP
<input type="checkbox"/> D	Honorary Col / Capt (N) and Honorary LCol / Cdr
<input type="checkbox"/> D	Members of the Canadian Coast Guard

Code	Category Group
<input type="checkbox"/> D	CADETS
<input type="checkbox"/> D	Jr. Canadian Rangers
<input type="checkbox"/> D-F	Family of current DND Public Servant, DRDC, DCC, CSE
<input type="checkbox"/> D-F	Family of current Staff of the NPF
<input type="checkbox"/> D-F	Family of current Staff of MFRC
<input type="checkbox"/> D-F	Family of Serving RCMP
<input type="checkbox"/> D-F	Family of Honorary Col / Capt (N) and Honorary LCol / Cdr
<input type="checkbox"/> D-F	Families of Members of the Canadian Coast Guard
<input type="checkbox"/> P	Former Staff of NPF, DND, DRDC, DCC, CSE, RCMP, Coast Guard
<input type="checkbox"/> P-F	Family of Former Staff of NPF, DND, DRDC, DCC, CSE
<input type="checkbox"/> P-F	Family of Former RCMP with pension
<input type="checkbox"/> P-F	Families of former members of Canadian Coast Guard in receipt of a pension



Step 2: In the table below, find your primary code from Section 1, and enter information in the applicable fields.

Section 2 – Cardholder Details

CF	Service No.	CAF Enrollment Date	—	CAF Release Date (optional)
CF-F	Member Service No.	Member Last Name	Member First Name	—
V	Service No.	CAF Enrollment Date	CAF Release Date	—
V-F	Member Service No.	Member Last Name	Member First Name	Member's Release Date
FF	Service No.	CAF Assignment Start Date	CAF Assignment End Date	CAF Release Date (optional)
FF-F	Member Service No.	Member Last Name	Member First Name	—
D	PRI, NPF #, RCMP or Honorary Service No.	Enrollment Date	—	—
D-F	Member's PRI, NPF #, RCMP, or Honorary Service No.	Member Last Name	Member First Name	—

Section 3 – Identifying Documents

Step 3: Find your category code in the table below and see which identifying documents you need to submit.

Step 4: Make a copy of the identifying document that applies to you and include it with this form.

Code	Identifying Documents to Submit
CF and CF-F	<ul style="list-style-type: none"> • Copy of the member's NDI 20 (Canadian Forces ID Card) or NDI 10 (Temporary ID Card)
V and V-F	<p>One of the following:</p> <ul style="list-style-type: none"> • Copy of the member's NDI 75 or CF 75 (Record of Service ID Card) • Copy of the member's Pension Statement • Copy of the member's Release Certificate / Discharge papers • Communication from either VAC or CAF that confirms the member's service.
FF and FF-F	<ul style="list-style-type: none"> • Assignment paperwork • Copy of the member's NDI 30 (Allied Force ID Card) or NDI 31
D and D-F	<ul style="list-style-type: none"> • For MFRC employees: A letter from the MFRC stating that you are a current employee • For RCMP: Copy of the member's RCMP Service ID • For Honorary: Appointment letter, copy of NDI 10 • For current Staff of NPF, CF: No identifying documents to submit • For current DND public servant: Copy of member's NDI 21 (Civilian ID Card) • For all others: Copy of member's NDI 21 (Civilian ID Card) or ID Badge • For Cadets and JCR, the digital token supplied by your instructor
P and P-F	<ul style="list-style-type: none"> • Copy of the member's Pension statement • Proof of employment from your former employer

Section 4 – Communications and promotions

Would you like to receive communications regarding sales, events, and promotions eligible for the membership Yes No

If Yes, please specify which language you would like to receive communications English French

Send Mail to: Coordinator, CF One Card, CFMWS HQ, 4210 Labelle Street, Ottawa, ON, K1A 0K2

Contact Us: Phone: 1-855-245-0330 or **Email:** service@cfmws.com

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