

## **INFORMATION AND INSTRUCTIONS**

**GENERAL:** The Order Of Daedalians was organized on 26 March 1934 by WW I military pilots. Today the Order honors, as its Founder Members, over 14,000 WW I pilots who were commissioned and rated as military pilots of heavier-than-air powered aircraft no later than the Armistice on 11 November 1918. The Order perpetuates their memories as patriots who placed service to the nation above personal safety or position and as the first to fly their country's airplanes in time of war.

Additionally, through its membership, a world-wide network of Daedalian Flights and the Daedalian Foundation's comprehensive awards program of trophies, medals, scholarships and fellowships, the Order of Daedalians supports the armed forces of the United States by encouraging excellence in the performance of military duties; patriotism, integrity and good character in our nation's youth; military careers as pilots; safe practices in flight and education in aerospace disciplines.

### **MEMBER CATEGORIES:**

**FOUNDER MEMBER:** A WW I pilot who was commissioned and rated as a military pilot of heavier-than-air powered aircraft no later than the Armistice on 11 November 1918.

**NAMED MEMBER:** A military pilot, commissioned, warrant or flight officer, in any component of the United States armed forces who is serving on active duty or is retired, or has separated under honorable conditions.

**HEREDITARY MEMBER:** A person, 18 years or over, and the direct descendant, real or adopted, of a Founder Member.

**NOTE:** Named and Hereditary members are assigned to perpetuate Founder Memberships.

**ELIGIBILITY:** If you are not a son or daughter of the Founder Member, please use the following space to trace the lineage of your descendency to include full name and relationships:

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**PROCEDURES:** Applicants will furnish all required and appropriate information on the application form, sign their names, and pay the current year's annual dues and a registration fee. New member dues received after 1 October will be credited to the next year.

Social security numbers are required for file control and will not be divulged.

An Hereditary Member is assigned the same member number as that carried by the assigned Founder Member.

Mail with check for \$35.00 (annual dues of \$25.00 plus the one-time registration fee of \$10.00) plus documentation required to:

**ORDER OF DAEDALAINS**  
**P.O. Box 249**  
**Randolph AFB, TX 78148-0249**



**ORDER OF DAEDALIANS**  
**Application for Hereditary Membership**  
*(Instructions Included)*

America's Premier  
 Fraternal Organization  
 Of Military Pilots

PLACE \_\_\_\_\_ DATE \_\_\_\_\_

**TO THE NATIONAL COMMANDER, ORDER OF DAEDALIANS:**

**Part I, APPLICATION:**

I am eighteen years or older, and as the direct descendant of \_\_\_\_\_, who is a Founder Member in the Order of Daedalians, I hereby apply for an Hereditary Membership. I understand this is an active membership with full rights and privileges, and it will allow me to perpetuate the Founder Membership of my \_\_\_\_\_. If accepted, I promise that I will forever abide by the tenets of the Order of Daedalians: First, to place Nation above self; Second, to be worthy of the trust and confidence of fellow Daedalians. I make these promises with no equivocation or mental reservations and ask the aid of Almighty God to assist me in unwavering adherence to the spirit and provisions of this promise.

FULL NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

DATE OF BIRTH \_\_\_\_\_ PLACE \_\_\_\_\_

PRESENT OCCUPATION \_\_\_\_\_

MILITARY SERVICE (IF ANY): \_\_\_\_\_  
 \_\_\_\_\_

SPOUSE'S FULL NAME \_\_\_\_\_

CHILDREN'S NAMES \_\_\_\_\_  
 \_\_\_\_\_

IDENTIFY OTHER DAEDALIANS IN YOUR FAMILY \_\_\_\_\_  
 \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**PART II, FOR NATIONAL HEADQUARTERS ACTION:** This application for Hereditary Membership in the Order of Daedalians is approved, and THE NEW MEMBER is assigned to perpetuate:

FOUNDER MEMBERSHIP NO. \_\_\_\_\_ OF \_\_\_\_\_

DATE OF APPROVAL: \_\_\_\_\_

FLIGHT: \_\_\_\_\_

\_\_\_\_\_  
 NATIONAL ADJUTANT OR ASSISTANT ADJUTANT

Check # \_\_\_\_\_ Deposit # \_\_\_\_\_