

Great News!

Do you know of a friend, neighbor, or relative wanting to come on Naval Air Station Corpus Christi (NASCC) to use our outstanding Gulf Winds Golf Course, Outdoor Recreation/Marina, Shields Park/Paradise Cove RV Parks? Well, now they can!



MWR Guest Card Program

Here is how it works!

Eligibility:

Any Individuals who meet the criminal history check and requirements. Minors 16 years of age and under must be accompanied by an adult MWR Guest Card holder at all times.

Costs:

The MWR Guest Card costs \$20.00 per year; \$10.00 for children 16 years of age and under and is valid for one year from the date of issuance.

How to apply:

It's Simple to apply for the MWR Guest Card!

Visit the Pass and Decal Office aboard NASCC between the hours of 8 am - 12 pm on Monday, Wednesday & Friday; 8 am - 11 am and 1 pm - 4 pm on Tuesday and Thursday complete the application and pay the MWR Guest Card fee. Application can also be printed online at <https://www.cnic.navy.mil/CorpusChristi> found under "Fleet and Family Readiness - things to do". Criminal History Check will be conducted and takes approximately 5 days to complete. Once approved, each applicant will be notified by phone and asked to come to the Pass and Decal Office to be issued their picture ID card, and MWR Guest Card Sticker that will allow them access into NASCC to visit the eligible facilities. MWR Guest Card and MWR Guest Card Sticker will be valid for a period of one year.

If you have further questions, regarding the MWR Guest Card Program, please call (361) 961-3961.



**Corpus Christi Naval Air Station
MWR Guest Card Application**

Please take your completed application along with cash or check for \$20.00 for Adults/ \$10.00 for Children 16 and under, payable to MWR Fund to Pass and Decal, Bldg. 1794.
We will process your application, conduct a criminal history check and telephone you in a few days to set up an appointment.

Thank you for your support of the Morale, Welfare and Recreation Department!
If you need any additional information, please contact MWR at 361-961-3961.

APPLICANT INFORMATION			
NAME	SSN	DOB	
ADDRESS	PHONE	DRIVERS LICENSE	
VEHICLE INFORMATION			
MAKE	MODEL	YEAR	COLOR
TAG NO.	STATE	INSURANCE CO.	POLICY NO.
I VERIFY THAT ALL INFORMATION PROVIDED IS CORRECT			
SIGNATURE OF VERIFIER		DATE	

APPLICANT'S STATEMENT AND SIGNATURE			
<p>I AGREE TO OBEY ALL RULES AND REGULATIONS OF NAVAL AIR STATION CORPUS CHRISTI AS A CONDITION OF ENTRY. I CONSENT TO ANY INSPECTION AND SEARCH OF MY PERSON, PROPERTY OR VEHICLE. I AM AWARE OF AND WILL COMPLY WITH THE RULES PROHIBITING THE INTRODUCTION OF LIQUOR, DRUGS OR ANY TYPE OF WEAPON ONTO NAVAL AIR STATION CORPUS CHRISTI. I ASSUME ALL RISKS FOR PERSONAL LOSS, DAMAGE OR INJURY OF ANY NATURE TO MYSELF OR US GOVERNMENT PROPERTY WHILE ON THE BASE. I UNDERSTAND THIS PASS IS FOR MY PERSONAL USE AND CANNOT BE TRANSFERRED. I ACKNOWLEDGE A FEDERAL AND LOCAL CRIMINAL HISTORY CHECK WILL BE PERFORMED.</p> <p><u>PRIVACY ACT STATEMENT:</u> THIS RECORD CONTAINS PERSONAL INFORMATION CONCERNING CIVILIAN PERSONNEL WHO MAY BE GRANTED ACCESS TO GOVERNMENT INSTALLATION FOR THE PURPOSE OF USING MORALE, WELFARE AND RECREATIONAL FACILITIES. AUTHORITY TO OBTAIN, USE AND DISCLOSE THIS INFORMATION IS GOVERNED BY 5 U.S.C. ss. 552.A and SECNAVINST 5211.5E. DISCLOSURE OF THIS INFORMATION IS VOLUNTARY HOWEVER FAILURE TO PROVIDE THE REQUESTED INFORMATION COULD RESULT IN DENIAL OF ACCESS AUTHORITY.</p>			
I CERTIFY THAT ALL INFORMATION PROVIDED IS CORRECT			
APPLICANT SIGNATURE			DATE
<input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL		MWR OFFICIAL SIGNATURE	DATE
LOCAL AREA FILES CHECK WAS PERFORMED AND REVEAL ADVERSE OR DEROGATORY INFORMATION		<input type="checkbox"/> DID <input type="checkbox"/> DID NOT	INITIALS DATE



Acknowledgement Statement

The MWR Guest Card is for patrons only to visit our Category C facilities: Corpus Christi Bay Club, Gulf Winds Golf Course, and Outdoor Recreation/Marina, Shields Park/Paradise Cove RV Parks, and Combat City Paintball Range. Your guest card will be revoked if you use it for any other purpose than stated above.

Signature of Acknowledgement

Date

DEPARTMENT OF DEFENSE
AUTHORITY FOR RELEASE OF INFORMATION AND RECORDS

In accordance with the Privacy Act of 1974, I have been provided with a copy of a statement advising me that certain information is required to assist the Naval Air Station Corpus Christi in making a security determination concerning me and that execution of this form is voluntary.

I hereby authorize and consent to the release of information and records bearing on my personal history, academic record, job performance and arrests and convictions, if any, to Special Agents of the Department of Defense. The information will be used for the purpose of determining my qualifications for employment with the Federal Government, service in the Armed Forces, or access to classified information.

This authorization is valid for one year after my signing. Upon request, a copy of this signed statement may be furnished to the school, present or former employer, present or former landlord, criminal justice agency, or other person furnishing such information or record.

DATE

NAME (FIRST, LAST, MI)