

**OMB Control Number 0704-0547, expires XX-XX-XXXX**

**AFN Now Privacy Act Statement:**

PRINCIPAL PURPOSE: To determine the eligibility and continued validation of authorized individuals outside the United States, its territories or possessions, who register to use the AFN Now application. Collected information may include: first and last name, duty station/residence country and locality, DoD ID Number, sponsor/dependent status, work, home and mobile phone numbers, grade/rank, and date of birth.

ROUTINE USE: (a) Verification of eligibility to receive AFN content, maintain demographic data on AFN's viewership, and increase Force Protection capabilities of local and COCOM commanders. (b) general request for information under the Freedom of Information Act, (c) legitimate request from law enforcement, (d) Congressional Inquiries, (e) Department of Justice for litigation purposes, (f) National Archives and Records Administration for the purpose of records management inspections, (g) disclosures required by international agreement.

DISCLOSURE IS VOLUNTARY: However, failure to supply the requested information will result in a denial of AFN service.

**AFN Now Agency Disclosure Notice (ADN):**

The public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Directives Division, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

I UNDERSTAND



## CREATE A NEW ACCOUNT.

Already have an account? [Login](#)

Having trouble? See [How To Register](#)

DoD ID



Date of Birth



mm/dd/yyyy



First Name



Last Name



Email



Phone Number



Choose a username



I'm not a robot

reCAPTCHA  
Privacy - Terms

I have read and agree to the [Terms of Service](#).

REGISTER