

The 28th Infantry Division Association
MEMBERSHIP APPLICATION AND ANNUAL DUES RENEWAL FORM

Name _____ SSN _____
Last First MI Last Four Digits

Address _____ Spouse's Name _____
Street Address, Apartment, etc.

City State Zip Date of Birth _____

Home Phone _____ Work Phone _____ Fax _____ Email _____

Status _____ Dates of Service _____
(Active Guard M-Day) (Retired) (Former Guard) (Other)

Active Duty: WWII _____; Korean War _____; Viet Nam _____; Desert Storm _____; Kosovo _____; Iraq _____;
Afghanistan _____; Home Land Security _____; Other Conflict(s)/Campaign(s) _____

Unit(s) of Affiliation (Indicate all units that you have served with): _____

ANNUAL DUES:

M-Day Soldier (E1 to E5) \$5.00 _____ M-Day Soldier (E6 to E9) \$10.00 _____ All Officers \$13.00 _____
Retirees \$13.00 _____ Former Guard & All Others \$13.00 _____ Outside United States \$15.00 _____

Life Membership is available. Call 717-787-9385 for more information.

NUMBER OF YEARS RENEWAL _____ **TOTAL \$** _____

APPLICANT'S SIGNATURE _____ **DATE** _____

PRINT AND MAIL WITH CHECK OR MONEY ORDER MADE PAYABLE TO:

28th INFANTRY DIVISION ASSOCIATION
1400 Calder Street, Building 3
Harrisburg, PA 17103

Visit our web site at: <http://28thinfantrydivisionassoc.org/> or contact us at 717-787-9385 for information.

PLEASE COMPLETE THE FOLLOWING ADDITIONAL INFORMATION: (Essential personal file information for historical records/inquiries)

Highest Rank Held _____ Your MOS _____ Wartime Service: Yes ___ No ___

Place entered on Active Duty _____ Training Center(s) _____

POW: Yes ___ No ___ Where _____ Wounded: Yes ___ No ___

Any Additional information you wish to add (ie: Decorations, awards, etc.): _____

Note any special events or actions which you may recall and why: _____

List any members in your squad, platoon, and company and their location (if known): _____

Place of Discharge: _____

PLEASE USE REVERSE SIDE OF FORM FOR ADDITIONAL INFORMATION

ASSOCIATION USE ONLY:

Date Received _____
Check No. _____ Amount Received: _____
Date Posted: _____ Card Mailed: _____