

# THE 28<sup>TH</sup> INFANTRY DIVISION ASSOCIATION

## MEMBERSHIP APPLICATION AND ANNUAL DUES RENEWAL FORM

NAME \_\_\_\_\_ SSN \_\_\_\_\_  
(Last) (First) (MI) (Last Four Digits)

ADDRESS \_\_\_\_\_  
(Street) (City) (State) (ZIP Code)

DATE OF BIRTH \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

UNIT(S) OF AFFILIATION \_\_\_\_\_

CONFLICTS/DATE OF SERVICE \_\_\_\_\_

### ASSOCIATION DUES

#### CURRENT SERVING MEMBERS:

E1 -- E4 \$5.00                      E5 – E7 \$7.00                      E8 -- E9 \$10.00                      OFFICERS -- \$15.00

CIRCLE APPLICABLE CATEGORY/NUMBER OF YEARS RENEWAL \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

RETIREES, FAMILY/FRIENDS OF 28<sup>TH</sup> ID ASSOCIATION, OUTSIDE USA MEMBERS, ETC:                      \$15.00

CIRCLE APPLICABLE CATEGORY/NUMBER OF YEARS RENEWAL \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

#### LIFE MEMBERSHIP:

AGE 45-49 \$300.00    AGE 50-54 \$250.00    AGE 55-59 \$200.00    AGE 60-64 \$150.00    AGE 65+ \$100.00

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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

28<sup>TH</sup> INFANTRY DIVISION ASSOCIATION  
1400 Calder Street, Building 8  
Harrisburg, PA 17103

Visit our web site at: [28thinfantrydivisionassoc.org](http://28thinfantrydivisionassoc.org) OR contact us at 717.497.0765 for information

USE THE REVERSE SIDE IF YOU WOULD LIKE TO PROVIDE ANY ADDITIONAL INFORMATION FOR HISTORICAL PURPOSES/INQUIRIES (i.e., Highest rank held, MOS/Branch, wartime service/location/dates, etc.)

ASSOC USE ONLY: Date Received \_\_\_\_\_ Check No \_\_\_\_\_ Amount Received \_\_\_\_\_ Card Mailed \_\_\_\_\_

# 28<sup>th</sup> Infantry Division Association

HIGHEST RANK HELD \_\_\_\_\_ YOUR MOS/BRANCH \_\_\_\_\_ 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 (I.E., DECORATIONS, AWARDS, ETC.):

\_\_\_\_\_

NOTE ANY SPECIAL EVENTS OR ACTIONS WHICH YOU MAY RECALL AND WHY:

\_\_\_\_\_

LIST ANY MEMBERS IN YOUR UNIT/COMPANY/PLATOON AND THEIR LOCATION (IF KNOWN):

\_\_\_\_\_

PLACE OF DISCHARGE: \_\_\_\_\_