

## CHANGE OF ADDRESS

Use this form - be sure your old address is on the reverse.

PLEASE PRINT

FIRST MI LAST

STREET or PO BOX CITY STATE ZIP

-----CUT HERE-----

## MEMBERSHIP REQUEST FORM

Copy and share this form with your fellow Red Arrow comrades

### 32nd Red Arrow Veteran Association Application for Life Membership

Circle One: \$10 - Served with the Red Arrow \$50 - Associate Member  
(Please Print)

NAME (Last, First, MI): \_\_\_\_\_

STREET ADDRESS or PO BOX: \_\_\_\_\_

CITY/STATE/ZIP+4: \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**\$10 Membership - Circle one:** WWII, Berlin Crisis, Cold War - NG, Desert Storm, Afghanistan -OEF, Iraq- OIF, 32nd Sep Inf Bde, 32nd IBCT

Unit(s) served with: \_\_\_\_\_ Dates: \_\_\_\_\_

**\$50 Associate Membership - Affiliation with/Attachment to/Interest in the 32nd:**

Primary newsletter delivery method is via e-mail.

Make check payable to '32nd Red Arrow Veteran Association' and send to:  
Red Arrow Veteran Association, 820 Elm Street, Wisconsin Rapids, WI 54494



*"Les Terribles"*