

USS WISCONSIN ASSOCIATION MEMBERSHIP/ CHANGE FORM

Please check one of the following:

- Membership Renewal, New Member, Associate Member, Update Information

* Denotes required information

*Name & Spouse's name

Names of additional members in same house joining

* Address

*City *State *Zip

*Telephone: Day Evening

*Email

Post email address to the website? Yes No

* Associate Members please include crewmember's name & your relationship along with his information below:

Please provide the following information for your time onboard the Wisconsin:

Rate/Rank Division Years onboard (ex: 1956-57)

I am on Active Duty. Yes No

I am enclosing dues for years (up to three (3) years) @ \$20.00 per year = \$

Additional members in same household @ \$10.00 per year = \$

Optional Donation to the USS WISCONSIN ASSOCIATION \$

TOTAL \$

Please make check payable to USS WISCONSIN ASSOCIATION.

Mail this form along with payment to: USS WISCONSIN ASSOCIATION 426 YORK ST APT C York, ME. 03909-1062

Association Use Only
Date rcvd: Check#:
Exp date: Date mailed:
New Returning Card Bylaws Pin

For any questions contact Mike Brown at MikeBrownBB64@gmail.com or 207-451-5225.

All information provided is for the use of the USS Wisconsin Association and its associates. We do not sell or otherwise disseminate information to other parties.