



10TH MOUNTAIN DIVISION DESCENDANTS, INC.



2019 Membership Application

MEMBERSHIP CATEGORIES

DESCENDANT

Daughter, son, sister, brother, grandchildren, great-grandchildren of a World War II 10th Mountain Division soldier.

Annual Dues: \$28

ASSOCIATE

Niece, nephew or spouse of a World War II 10th Mountain Division soldier, his friends and descendants. All *friends of the 10th* are welcome to join us under this category.

Annual Dues: \$23

FAMILY

Parents with children living in the same household. It can be a combination of the two previous categories.*

Annual Dues: \$60

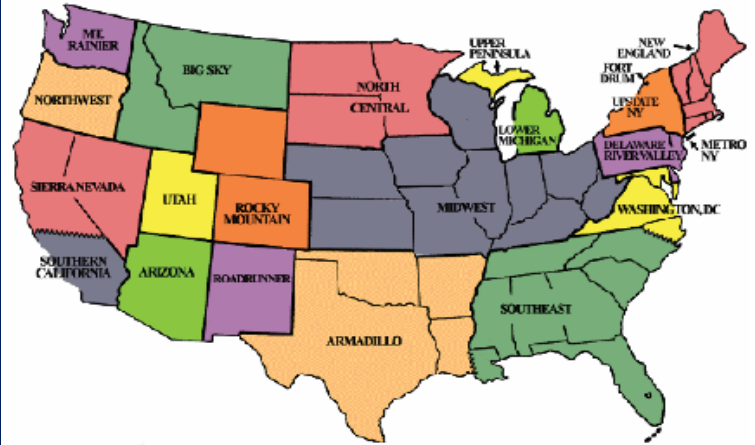
*For mailing purposes, please specify the Main member for Family Memberships. Include the names of all family members in your household. If needed, attach a separate sheet of paper.

CHAPTER INFORMATION

CHAPTER CODES

ARMADILLO	AR	NORTHWEST	NW
ARIZONA	AZ	ROCKY MOUNTAIN	RM
BIG SKY.....	BS	ROADRUNNER	RR
DELAWARE RIVER VALLEY.....	DRV	SOUTHERN CALIFORNIA	SC
LOWER MICHIGAN	LMI	SOUTH EAST	SE
METRO NY	MNY	SIERRA NEVADA	SN
MT. RAINIER.....	MTR	UTAH	UT
MIDWEST	MW	WASHINGTON, D.C.....	WDC
NEW ENGLAND	NE		

CHAPTER MAP



NOTE: The following chapters have joined forces to better serve our members:

FT DRUM + UPSTATE NY = **FTDRUNY**

NORTH CENTRAL + UPPER PENNSYLVANIA = **NOUP**

WORLD WAR II 10TH MOUNTAIN VETERAN'S INFORMATION

Veteran's Name:		His Unit:	
<input type="checkbox"/> Living	<input type="checkbox"/> Killed In Action	<input type="checkbox"/> Wounded In Action	Date:
		<input type="checkbox"/> Deceased	Date:

MEMBER INFORMATION

<input type="checkbox"/> New Member	<input type="checkbox"/> Renewal	Membership Category:	Is this a FAMILY Membership?	<input type="checkbox"/> YES	<input type="checkbox"/> NO				
<i>If renewing, indicate if any information has changed since last year</i>		<input type="checkbox"/> Descendant	<input type="checkbox"/> Associate	If so, are you the main member?		<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Member's Name:		Chapter Code: (Refer to chart)		Are you a Vet?			<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Mailing Address Line 1:				If so, which branch?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
Mailing Address Line 2:				Country (If other than U.S.A.):					
City:	State:	Zip Code:	Relationship to 10 th Mountain Vet:						
Phone:	E-Mail:								

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City:	State:	Zip Code:	Relationship to 10 th Mountain Vet:						
Phone:	E-Mail:								

TURN PAGE TO ADD MORE MEMBERS.
IF ADDITIONAL SPACE IS NEEDED,
PLEASE ATTACH A SEPARATE SHEET OF PAPER. THANKS!

	ACTION	DATE	INIT
FOR OFFICE USE ONLY	PSTMRK	_____	_____
	PO/PUP	_____	_____
	DE & PROC	_____	_____
	MAIL	_____	_____



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Phone:	E-Mail:		Relationship to 10 th Mountain Vet:

DUES

<table> <tr> <td>Membership Type</td> <td><i>How many?</i></td> <td></td> </tr> <tr> <td>Descendant:</td> <td>.....</td> <td>X \$28 =</td> </tr> <tr> <td>Associate:</td> <td>.....</td> <td>X \$23 =</td> </tr> <tr> <td>Family:</td> <td>.....</td> <td>X \$60 =</td> </tr> <tr> <td colspan="2">Optional Contribution to THE FINN-THORNTON SCHOLARSHIP FUND =</td> <td>_____</td> </tr> <tr> <td colspan="2">Total =</td> <td>=====</td> </tr> </table> <p>Please make checks payable to: 10TH MOUNTAIN DIVISION DESCENDANTS, INC.</p>	Membership Type	<i>How many?</i>		Descendant:	X \$28 =	Associate:	X \$23 =	Family:	X \$60 =	Optional Contribution to THE FINN-THORNTON SCHOLARSHIP FUND =		_____	Total =		=====	<p>Send your completed application and dues to:</p> <p>10TH MOUNTAIN DIVISION DESCENDANTS, INC. Don Perkins, Treasurer P.O. Box 398717 Miami Beach, FL 33239-8717</p>	<p>Please respond by December 31, 2018, to receive your 2019 Membership Welcome Kit by February 15, 2019</p>
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