New Membership Application - Please pass this along to prospective members *Note: New Dues Rates Effective 1 Dec 2013*

25TH INFANTRY DIVISION ASSOCIATION

Name: _____ Spouse name: _____

Street: _____

City: _____ State: ___ Zip: _____

25th Unit(s) served with: _____

Dates of 25th service: _____

Attach copies of your DD-214 or other documentation of service.

Email Address: _____ Phone: _____

Check all that apply: Dues: **Annual** ❑ $30 **Active-Duty 1st year Special** ❑ $20

Lifetime - *Your Age*: ❑ Less than 30 $770 ❑ 31-40 $645 ❑ 41-50 $500 ❑ 51-60 $350 ❑ 61-70 $225 ❑ 71+ $200

Donations: General Fund $_____ Memorial Fund $_____ Scholarship $_____ Archives $_____ Soldier Support $_____

Make checks payable to: "*25th Infantry Division Association*" or complete the credit card payment below.

Credit Card Payments - Check (√) one: ❑ Discover ❑ Visa ❑ MasterCard ❑ American Express

Name of Cardholder: _____ Billing Zip Code: _ _ _ _ _ CVC Code _ _ _ _
(3 digits on back of card except 4 digits on front of AMEX)

Card Number: _____ Expiration Date: _____

Signature of Cardholder: _____ Date: _____

Mail to: **25th Infantry Division Association, Post Office Box 7, Flourtown, PA 19031-0007**

Tropic Lightning Heritage Society Membership Application

Your Name: _____

Relative who served with the 25th? ☐ Yes ☐ No

If "Yes", his or her name and 25th Unit(s) served with & dates: _____

Reason for your interest in the 25th Infantry Division: _____

Your Street: _____

City: _____ State: ___ Zip: _____ Email: _____@_____

Home Phone: (___) _____ Work Phone: (___) _____ Cell: (___) _____

Check (√) ☐ **Annual Membership** $10 **or** ☐ **Lifetime Membership** $75

☐ **Annual Subscription to *Tropic Lightning Flashes*** $20 (for Annual or Lifetime Society Members Only)

Comments/Suggestions: _____

Make checks payable to: "*Tropic Lightning Heritage Society*" and mail to:

Jeanette Murrell • 5703 S. 320 Street • Auburn • Washington • 98001