



Second Infantry Regiment Association

Membership Application and Renewal Form

If renewing, fill out name, address, and any information you wish updated.

Type Of Membership: ___New ___Renewal

Membership: Annual Dues: \$15 Lifetime membership \$50

Name _____ **Spouse Name:** _____

Address: _____

Phone: _____(home) _____(mobile)

Email: _____

It is more economical for the Association to communicate electronically. If you don't have email or if you would prefer, all correspondence can be mailed to you.

I prefer to receive correspondence via: ___Email ___US Mail

Dates of service with the regiment: _____

(If you know the month and year please enter YRMO i.e. August 1968 =6808)

Area(s) of operation, i.e. State Side, Normandy, Rhineland, WWII, Vietnam, Germany, Bosnia, Kosovo, Iraq, Afghanistan, etc. _____

Battalion: ___1 ___2 ___3 ___Other

Company: ___A ___B ___C ___D ___HHC

Other Unit: _____

Any information you feel appropriate, such as rank held, medals awarded, or duties performed during service: _____

Please mail your form, along with your check made out to: **2nd Infantry Regiment Association**

c/o John Kerins

34 Lawrence Drive

Lawrenceville, NJ 08648

Today's Date: _____