

27th Infantry Regiment Historical Society, Inc Membership Application

Date:_____ Check One: New____ Renewal____ Change____ Member#_____

Give A Gift Membership____ **From** _____

Name:_____ Spouse_____

Street Address or P.O. Box_____

City_____ State____ Zip_____

Home Phone(____)_____ Date of Birth_____ Anniversary_____

Email _____ Please Email My Newsletter (Check Box) ____

Emergency Contact/Relationship _____ Phone_____

Regimental Service:

Company_____ Battalion_____ Dates_____ Location_____

Membership Rates: Active Duty Wolfhounds receive a 2 year free membership____

1-Year Membership Dues \$27.00____ 1-Year Associate Membership Dues \$27.00____

Life Membership Dues \$227.00____ Associate Life Membership Dues \$227.00____

Life memberships can be paid in four installments of \$56.75 each quarter (Over 1 Year)

Dues are not deductible as a donation.

Donations: Troop Fund____ Operating Fund____ Newsletter____ Scholarship____

Holy Family Orphanage____ 25th Division Monument____

Please Make all checks payable to: **27th Infantry Regiment Historical Society, Inc.** and mail to:

The Wolfhound Pack

Attn: Brenda Steele

Membership Chair

Bsteele1957@hotmail.com

31 Annie Lou Dr

Hamilton, OH 45013

PLEASE INCLUDE A COPY OF YOUR DD 214. BLOT OUT SOCIAL SECURITY NUMBER.