



*USS Will Rogers Veterans Association
c/o Ed Greany, Vice-president
PO Box 720790
Pinon Hills, CA 92372-0790*



APPLICATION FOR LIFE MEMBERSHIP

In the
USS WILL ROGERS VETERANS ASSOCIATION, INC.

(Please print)

Your name (first, middle initial, last) _____

Spouse (optional) (first, middle initial, last) _____

Address _____

City _____ State _____ Zip code _____

Phone (____) _____ Secondary or Cell phone (____) _____

E-mail _____ Secondary E-mail _____

Nick name(s) on the boat _____

Rank/Rate when you left the boat _____

Positions or job on the boat _____

Number of Patrols on the Will Rogers _____

Crew (Blue and/or Gold and/or Decomm) _____

From Month/Year ____/____/____ to Month/Year ____/____/____ Year of Birth 19 ____

Your age: Your Life Membership Fee:

45-49	\$250
50-54	\$200
55-59	\$150
60-64	\$100
65+	\$ 50

Please make your check or money order payable to:
USS Will Rogers Veterans Association, Inc. and
mail check / money order with your application to:
USS Will Rogers Veterans Association, Inc.
c/o Ken Keelger, Treasurer
60 Mayflower Drive
Seekonk, MA 02771