Pearl Harbor Survivors Association, Inc.

APPLICATION FOR MEMBERSHIP

OFFICE USE ONLY
DATE_____
UNIT#_____
CARD#_____
GRAM_____
AMOUNT_____
SIG_____

(Please Print or use Typewriter)

RANK OR RATE 12/07/41: _____ DATE: _____

*NAME: _____ PHONE: (___)_____
Last First Middle

*ADDRESS: _____
Street City State ZIP Code

*DATE OF BIRTH: _____MARITAL STATUS: _____

*SHIP, STATION, OR UNIT TO WHICH ATTACHED DECEMBER 7, 1941_____

*BRANCH OF SERVICE: _____ * SERVICE OR SERIAL NO_____

ENLISTMENT DATE _____ DISCHARGE DATE_____

NEXT OF KIN _____

ADDRESS _____

NAME OF SPOUSE _____
Last First Middle

BATTLES PARTICIPATED IN _____

AWARDS OR MEDALS RECEIVED _____

SPONSORED BY _____ CHAPTER_____

APPLICATION PROCESSING REQUIREMENTS

1. Items marked with an asterisk (*) must be completed.
2. Enclose a **copy** of an Honorable Discharge (Front & Back) or a Discharge Under Honorable Conditions (Front & Back) or a **copy** of Statement of Service DD-214.
3. A brief account of your experience during the attack on December 7, 1941, on the reverse of this form.

MEMBERSHIP REQUIREMENTS

Must have been a member of the U. S. Military Forces on December 7, 1941 (Army, Army Air Corps, Navy, Marine Corps, or Coast Guard.) Must have been on the island of Oahu or off-shore, not to exceed three (3) miles at the actual time of the attack (7:55 to 9:45 a. m., December 7, 1941.

*_____

Please enclose check or money order, payable to PHSA, Inc., for $21.00 to cover the initiation fee of $5.00, dues of $10.00 and the Pearl Harbor GRAM publishing and mailing fee of $6.00. Dues and mailing fee will be assessed annually. LIFE MEMBERSHIP is $81.00 ($70.00 plus initiation fee of $5.00 and a publishing and mailing fee of $6.00, the mailing fee is assessed annually.) mail check and application to: NATIONAL SECRETARY, P O Box 1816, Carlsbad CA 92018-1816