

MEMBERSHIP APPLICATION

PLEASE PRINT CLEARLY

MEMBERSHIP: \$40.00 per calendar year; if you would like to give more it will go towards helping Tin Can Sailors

Name _____ E-Mail _____

First _____ Last _____ Middle _____

Address _____ City _____ State _____ Zip _____

Phone No. _____

Ship and Hull No. _____ Dates Served Aboard _____

Ship and Hull No. _____ Dates Served Aboard _____

Ship and Hull No. _____ Dates Served Aboard _____

Ship and Hull No. _____ Dates Served Aboard _____

Highest Rank/Rate Held _____

Mail this form to: Tin Can Sailors, PO Box 100, Somerset, MA 02726

Make your check payable to Tin Can Sailors or provide your Visa, MasterCard, American Express or Discover.

Card Number: _____ / _____ / _____ Expiration Date: _____ / _____ Security Code: _____

How did you hear about us? _____

Recruited By: _____

Address: _____

To join over the phone using a credit card, call us at (508) 677-0515

Please provide billing address if different from shipping