MEMBERSHIP CHANGE FORM

Welcome to Squadrons & Shipmates Change Form
of the U.S.S. Franklin D. Roosevelt & U.S.S. Midway

PLEASE ONLY INDICATE THE INFORMATION THAT HAS CHANGED BELOW THE FIRST LINE
REGULAR MEMBERS MAY BECOME LIFETIME MEMBERS AND AUXILIARY MEMBERS MAY BECOME REGULAR MEMBERS

NAME_____ _____ _____ Birth date ____/____/19____
First Middle Last Month Day Year

NEW MAILING ADDRESS_____ _____
Unit or Apt Number

CITY_____**STATE**_____**ZIP CODE**_____

Birth date Anniversary Date

SPOUSE'S NAME_____ _____/_____/19_____ _____/_____/_____
Optional Month Day Year

NEW HOME TELEPHONE (_____)_____ **CELL** (_____)_____
(Optional)

NEW E-MAIL ADDRESS_____

I SERVED ABOARD □ MIDWAY □ ROOSEVELT □ BOTH **19**_____**to 19**_____ | _____
Years Aboard Division, Squadron or Department

I SERVED IN SQUADRON _____ _____ **19**_____**to 19**_____
Official Name Nickname Years Served

I SERVED FOR_____**YEARS in the** _____**USN**_____**USNR**_____**USMC**____**ARMY**____**USAF**_____**USCG**

RATE & RANK AT DISCHARGE_____

LIST ADDITIONAL NAMES OF PERSONNEL YOU WISH THE ORGANIZATION TO FIND, WHO SERVED IN YOUR DETACHMENT, DIVISION OR SQUADRON DURING THE TIME YOU SERVED. HOMETOWNS ARE MOST IMPORTANT

1_____**age**_____ **4**_____**age**_____

2_____**age**_____ **5**_____**age**_____

3_____**age**_____ **6**_____**age**_____

Please provide as much information as you can remember, full name and middle name if known, ages, spouse's name, & TOWN & STATE.

SIGNATURE_____**DATE SIGNED**_____/_____/ **20**_____

PLEASE MAIL OR FAX CHANGE FORM TO

SQUADRONS & SHIPMATES
346 CARPENTER DRIVE SUITE # 29
ATLANTA, GEORGIA 30328-5029 **(404) 497 0943**
(404) 497 0944 FAX

MEMBERSHIP NUMBER_____

I WANT TO BECOME A_____ **LIFETIME OR** _____**REGULAR MEMBER** $_____.____**IS ENCLOSED**