

## 2012 WWII HRS Membership Application Form



1. One member per application. See instruction sheet for further details.
2. A separate signed and notarized parent/guardian form is required for all minors.
3. Expiration is 31 December 2012. For more information see <http://worldwartwohrs.org>
4. Forms that are incomplete, unsigned, or lack unit commander approval will be returned.
5. By mail send with dues to Charles Gallagher, 111 E. Willow St. Apt. 1 Normal, IL 61761
6. By email send to Ron Kapustka [fourboys@ix.netcom.com](mailto:fourboys@ix.netcom.com)

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### Member Information *Please complete all fields.*

Last Name	First Name	Middle Initial	
Street Address			
City	State	ZIP Code	DOB m/d/year
Telephone	E-Mail		

### Membership Type *Funds should be payable to "WWIIHRS" Family members must reside at same address;.*

<input checked="" type="radio"/> Regular Member \$20 <input type="radio"/> Family Member \$5	<input checked="" type="radio"/> Check <input type="radio"/> Money Order <input type="radio"/> Paypal
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<b>Unit Affiliation</b> <i>WWII HRS chartered units only</i>	<b>Unit Commander</b> <i>WWII HRS Unit Commanders only</i>
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Primary Unit 105th ECB, 30th ID, USA	Primary Unit Commander Major Phil Owens
Secondary Unit _____	Secondary Unit Commander _____

### Agreement and Signature *\*Primary unit commander approval must include signature.*

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a member, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I agree to follow the World War Two Historical Re-Enactment Society By-Laws, Safety and Authenticity rules and I understand that there are dangerous circumstances in re-enacting and do so at my own risk. I also certify that I am at least eighteen years old. If under eighteen years of age, a Parent/Guardian Consent form must be submitted with application. The applicant acknowledges that, although membership is not denied to those less than eighteen years of age, certain restrictions apply. These can be found in the Society's By-Laws.

Signature	Date
Unit Commander Approval*	Date

Date Received _____ Check/MO# _____ Amount _____ Date Sent _____
Unit Commander approval for electronic payment _____ E-Payment amount _____

