

Membership Application

2005 Calendar Year

(TMD-5)

Membership Application or Renewal
Tenth Mountain Division Living History Display Group, Inc.

1. This application is for all new members and renewals. Please complete all requested information.
2. Legibly print or type. Use one application per person.
3. If applicant is a new member, please note in the space provided.
4. If applicant is renewing, please note in the space provided.
5. Make checks payable to the *Tenth Mountain Division Living History Display Group, Inc.*, and mail to the address noted below.

Personal Information

Applicant Name: _____

LAST

FIRST

MIDDLE INITIAL

Address: _____

NUMBER

STREET

APARTMENT NUMBER

CITY

STATE

ZIP CODE (+ 4)

Is This a New Address?

Yes

No

Phone Number: (____) ____ - _____

Date of Birth: ____ - ____ - ____

E-Mail Address: _____

Affiliation Information

Other Historical or Reenactment Affiliations:

1st Affiliation Nationality or Unit Portrayed

2nd Affiliation Nationality or Unit Portrayed

3rd Affiliation Nationality or Unit Portrayed

New Member?

Renewal ?

I agree to follow the bylaws, guidelines, safety and authenticity policies and any other standards of the *Tenth Mountain Division Living History Display Group, Inc.*. I will abide by all decisions involving safety, and accept full responsibility for my own actions as involved with this activity. I agree to provide a signed copy of the liability waiver as it appears on the reverse of this application.

X: _____

Dues: **Single Membership** **\$20.00 annually ***
 Family Membership **\$30.00 annually ***

* All membership dues will be reduced by 1/2 if the member participates in 3 events, talks or other approved activities as a representative of the Tenth Mountain Division Living History Display Group, Inc. in the previous calendar year.

Amount Enclosed: \$ _____

Mail To: **Scott Koskie**
 14570 N Co. Rd 7
 Wellington, CO. U.S.A. 80549