

THE 24TH INFANTRY DIVISION ASSOCIATION MEMBERSHIP APPLICATION



I desire to be: Enrolled (or) Reinstated; as a Member (or) Associate Member (please check the proper two boxes) of the 24th "Victory Division" Association					
☐ Annual Dues - \$40.00	•	joining in ' or 5 yearly	The Associa	tion. * of \$60.00 each. *	
NAME					
ADDRESS					
CITY	STATE 2	ZIP CODE+4	<u> </u>	_ -	
PHONE	EMAIL		@		
OCCUPATION	SPOUSE'S NAME				
Served <u>IN</u> the 24th Divisi	on, <u>OR</u> was Member of Ar	ıy Unit Eve	er Attached <u>T</u>	<u>O</u> the 24th at any 1	time.
Unit:(e.g., 5th, 19th, 21st, 3rd En	Squad g, etc.)	_ Plt/Bat (Co Bn		
	Fro an, Korea, Germany, Ft. Stewart,				
POW: From (Yr.) To (Y	r.)				
Other Unit Served With:	From (Yr.)	To (Yr.)		
Sponsor (not necessary):					
Comment:					

* - Note: Due to expenses incurred in running the Association, i.e. Taro Leaf Publishing, issuing Life Member Cards, banking fees, etc., all fees paid are non-refundable.

Please make checks in above amount payable to the **"24th Infantry Division Association"** and mail with this completed application to:

Brad Johnson
Treasurer
4105 Eagle View Ct
Columbia, MO 65203