American WWII Orphans Network Application, Registration & Renewal Form

I would like to become a member Register my father/family member and me only Renew my membership		Names and addresses of your siblings with same father, and/or additional family members: (Please include information on another sheet, if necessary.) Membership Levels			
Information about You (please print clearly)					
Address		Any child of a member of the U.S. Armed Forces, Coast Guard or Merchant Marine, who was killed, remains missing in			
City, State, Zip		action, or who	died in the lir	ne of duty or later d	ied of wounds
Phone	(home, work, cell)			g World War II, is on the graph of the graph	
E-mail+		as a Family N	as a Family Member . Any individual, including friends of those killed in World War II, those who wish to participate		
				II, those who wish nizations with an	
Do you prefer to reco	eive <i>The Star</i> electronically? Y N	compatible w	ith AWON's	purposes and goa	
	vill not receive a copy in the mail. You will ion to read your copy online.)	to join as a Su			
Renewing members may skip to Dues Options		Check Your Membership Category: — Orphan — Family — Supporting			
Relationship to Serviceman					
Your Date of Birth	Dues and Donation Options				
Where did you hea	Basic annual membership dues are \$25. Sponsor, Gold Star and Multi-year memberships also are available. Circle your				
		option and to	tal below:		
Information a	about WWII Serviceman		1 Year	2 Year	3 Year
Be as complete as p information, leave it bl not delay mailing appl	Basic	\$25 \$50	\$48 \$96	\$70 \$140	
Name		Sponsor Gold Star	\$100	\$192	\$140 \$280
	First M.I.			ıde a donation	
Birth Date	AWON Memorial Day Wreath Fund? \$ AWON General Fund? \$				
Date of Death					
Place of Death					
Where Buried		AWON is a humanitarian, nonprofit, nonpolitical, public service organization			
Military Unit —		under Section 50 Membership is no		Federal Tax code (EII ister in our database.	NB #91-1538912).
Service Number -					
Additional details about serviceman's death or service: (rank, medals, etc. Add additional sheet, if necessary.)		Make check payable to AWON and mail it and form to:			
			AWON	Treasurer	
Home Town and S	5745 Lee Road				
Wife's Maiden Naı		Indianapo	olis, IN 46216		
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