USS GREGORY DD 802 ASSOCIATION, INC

Shipmates Membership Form

Name	Spouse
Address:	
City:	
Phone: () Email:	
Dates Served on Gregory: From:	To:
Last Rate: (MM, BM, GM, Etc.):	
Spouse or Family Me	embership Form
Name	
Former Shipmates Name:	
Relationship to Shipmate:	
Address:	
City:	State: Zip:
Phone: () Email:	
Dates Served on Gregory: From:	To:
Last Rate: (MM, BM, GM, Etc.):	

DUES: \$5.00 per person per year!

MAKE CHECKS PAYABLE TO: USS GREGORY DD 802 ASSOCIATION, INC.

SEND DUES AND THIS COMPLETED FORM TO:

Ken Boyer, Secretary USS Gregory DD 802 Association, Inc. 2579 Aldine Street Roseville, MN 55113

(651) 633-6247 Email: gloriab13@usfamily.net