



**National Association of the 10th Mountain Division, Inc.  
P.O. Box 150  
Carthage, NY 13619**

**DUES NOTICE/APPLICATION FORM**

**For:**

Make check payable to:

**National Association of the 10th Mountain Division, Inc.**

Dues (includes membership in one chapter)	\$ <u>20.00</u>
Additional chapters (\$7.50 each)	\$ _____
First Class mail for <i>Blizzard</i> (\$5.00)	\$ _____
Donation (10th Mtn Div. Foundation)	\$ _____
Donation (10th Mtn Div. Resource Center)	\$ _____
Donation (10th Mtn.Assoc. Operating Fund)	\$ _____
Donation (Internat Fed. of Mt. Soldiers)	\$ _____
<b>Donation (10<sup>th</sup> Mtn. (LI) Scholarship Fund)</b>	\$ _____
<b>Donation (Wounded Warrior Fund)</b>	\$ _____
Life Membership (\$300.00)	\$ _____

**Total:** \$ \_\_\_\_\_

I wish to be listed as a member of  
the chapter(s) checked:

- |  |  |
|--|--|
| <input type="checkbox"/> Arizona               | <input type="checkbox"/> Northwest           |
| <input type="checkbox"/> Armadillo             | <input type="checkbox"/> Road Runner         |
| <input type="checkbox"/> Big Sky               | <input type="checkbox"/> Rocky Mountain      |
| <input type="checkbox"/> Delaware River Valley | <input type="checkbox"/> Sierra Nevada       |
| <input type="checkbox"/> Fort Drum             | <input type="checkbox"/> Southeast           |
| <input type="checkbox"/> Lower Michigan        | <input type="checkbox"/> Southern California |
| <input type="checkbox"/> Metro New York        | <input type="checkbox"/> Upper Peninsula     |
| <input type="checkbox"/> Midwest               | <input type="checkbox"/> Upstate New York    |
| <input type="checkbox"/> Mt. Rainier           | <input type="checkbox"/> Utah                |
| <input type="checkbox"/> New England           | <input type="checkbox"/> Washington, DC      |
| <input type="checkbox"/> North Central         | <input type="checkbox"/> None                |

**MEMBERSHIP DATA**

<b><u>PRESENT INFORMATION</u></b>	<b><u>CHANGES – if required</u></b> (Please print)
Last Name:	Last Name _____
First Name:	First Name _____
Unit:	Unit _____
US Military Service:	US Mil Svc _____
Service Dates:	Dates _____
Address:	Address _____
City:	City _____
State:	State _____
ZIP:	ZIP _____
Spouse:	Spouse _____
Phone:	Phone _____
E-mail:	E-mail _____

**US Military Service Categories (Please circle appropriate number)**

- |                                    |  |
|------------------------------------|--|
| 1. 10th Div. WW II (1941-1945)     | 4. 10th Div. Light (1985-present)      |
| 2. 10th Div. Cold War (1948-1958)  | 5. Army Nat. Guard Mtn. Warfare School |
| 3. 99th Inf. Battalion (1942-1945) | 6. Vermont Nat. Guard Mtn..Bn.         |
| 7. Other US Military Service       |  |