



CLAMAGORE VETERANS ASSOCIATION
Life member Application and Information Sheet

Life Member # _____

First Name _____ MI _____ Last Name _____

Nick Name _____ Spouse _____

E-Mail _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

If not a crew member. (Relationship to member). _____

Date of Birth _____

Years on Clamagore _____ Rate/Rank _____

Circle: Plank Owner 1 or 2 Decommission Crew Crew Member

Member: SUBVETS _____ FRA _____ Other _____

Remarks: Other subs, etc.

Signature: _____ Date: _____

Treasurer _____ Secretary _____

To become a **lifetime member of the CVA:**

1. Complete the attached form and mail to the address below or to teddyk1942@gmail.com and jackieheard@knology.net

2. Mail a \$100.00 check for your membership to:

Ted Kubit
60 Skyridge Court
Silva, NC 28779

*NOTE: Should you need to update your information so that we may send you Clamagore and reunion news, please complete the form entitled **UPDATE YOUR CONTACT INFORMATION** under the **FORMS** button on cvanews.org.*