
380th BOMB GROUP ASSOCIATION

2010 MEMBERSHIP REGISTRATION INFORMATION

New_____ Renewal_____ Date: _____

Your Name_____

Squadron_____ 380th Duty_____

Please check if you are a * Regular Member _____ or an **Associate Member _____

***Associates*: 380th Veteran's Name:_____

Relationship:_____ Sqdn: _____

Your Address_____

City_____ State_____ Zip_____

Phone_____ E-mail_____

Spouse's Name_____

* *Regular member* means an original member of the 380th Bomb Group or the 380th Bomb Wing.

***Associate member* means a family member (or other affiliation) of an original member. If you are an Associate, please give the name of the original member, your relationship to that person, and his squadron number.

An annual donation of \$20 payable to **380th Bomb Group Association** will help defray costs of mailings throughout the year. Please mail your donation and registration form to:

Barbara Gotham
130 Colony Road
W Lafayette IN 47906-1209