

**USS KEARSARGE ASSOCIATION
CV, CVA, CVS-33, LHD3**

APPLICATION

NAME
LAST _____ **FIRST** _____ **MIDDLE I.** _____

ADDRESS _____

ZIP _____

PHONE NUMBER _____

DATES ABOARD _____ **TO** _____

DATES IN SERVICE _____ **TO** _____

RATE/RANK WHEN ABOARD _____

DIVISION _____

DETACHMENT _____

SQUADRON _____

PLANKOWNER? YES ___NO___

HOW DID YOU HEAR ABOUT ASSOCIATION? _____

EMAIL ADDRESS _____

ENCLOSE \$15 PAYABLE TO USS KEARSARGE ASSOCIATION

RETURN TO: USS KEARSARGE ASSOCIATION
RECORDING TREASURER

**Steve Norton
124 Hilltop Dr
Chula Vista, CA 91910**

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