



IAMAW VETERAN'S SERVICES PROGRAM

CONTACT INFORMATION SHEET

"PLEASE PRINT CLEARLY"

1. In which branch and/or branches have you served?

2. Please circle all that apply.

Air Force Army Coast Guard Marine Corps Navy National Guard Reserve

3. Please provide your current military status: Nat. Guard, Active Reserves, Retired,
Other _____

4. FULL NAME: _____
FIRST MIDDLE LAST Sr, Jr, III

5. HOME ADDRESS: _____
ADDRESS CITY STATE ZIP

6. TELEPHONE NUMBER: _____
HOME PHONE CELL PHONE

7. (PERSONAL) EMAIL ADDRESS: _____

8. IDENTIFY YOUR CURRENT LOCATION: _____
TERRITORY/ DISTRICT/ LOCAL LODGE

9. IDENTIFY YOUR UNION TITLE: _____

10. GENDER: _____ YEARS SERVED IN MILITARY: _____

11. CURRENT IAMAW STATUS: _____ IAM CARD NO: _____

12. WILLING TO SERVE ON A VETERAN SERVICE COMMITTEE: _____

PLEASE RETURN TO:
Retirees, Community & Membership Services Department
Attn: Director, Edward Manhart
9000 Machinists Place, Room 305
Upper Marlboro, MD 20772
or to fax: 301-967-3427