



Marine House Association, U.S.A

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Membership Application Form (Life Membership : \$50.00)

ATTACH PASSPORT TYPE PHOTO	NAME First Middle Last	DATE of BIRTH : Male <input type="checkbox"/> Female <input type="checkbox"/>
	AKA :	SERVICE # USMC <input type="checkbox"/> OR OTHERS <input type="checkbox"/>
	STREET ADDRESS :	DETAIL DESCRIPTION for OTHERS :
	CITY, STATE & ZIP : FAX. :	LIFE MEMBER : <input type="checkbox"/> ASSOCIATE MEMBER : <input type="checkbox"/>
	TELEPHONE NO. (HOME) FAX. :	ENROLLMENT DATE
LIFE MEMBER NO. :	TELEPHONE NO. (BUSINESS)	SERVICE DATE : FROM TO
	CELL. PHONE :	E-MAIL : RANK :
MILITARY STATUS : ACTIVE <input type="checkbox"/> RETIRED <input type="checkbox"/> MEDICAL DISCHARGE <input type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/>		
VETERAN STATUS : WORLD WAR II <input type="checkbox"/> KOREAN WAR <input type="checkbox"/> VIETNAM WAR <input type="checkbox"/> GULF WAR <input type="checkbox"/> IRAQ WAR <input type="checkbox"/>		
DATE : (Mo./Year)	MILITARY UNIT in KOREA (Description : Co. Bn, Regt)	BRIEF DESCRIPTION of TOUR of DUTY

