



6TH CAVALRY MEMBERSHIP APPLICATION

P.O. Box 262832, Houston, Texas 77207

Phone: 713-557-3223 or 281-558-2246

www.6thcav.net



Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Res. Phone: _____ Work Phone: _____

e-Mail address (this information is critical as most of our alerts and notices are sent by e-mail): _____

Current or prior military service if any: _____

Occupation: _____

List any military vehicles, weapons or military relics and collectables you own or would like to acquire: _____

Describe any particular area of military interest such as infantry, airborne, armor, era of military history, reenacting, military vehicle restoration,

GI or foreign military gear and equipment, weapons ,etc. _____

DUES: \$20 Annually - Your dues helps defray the cost of monthly mailings and notices, general operating expenses plus food and refreshment sometimes served at membership meetings. Make check payable to the 6th Cavalry Historical Assoc. and mail to P.O. Box 262832, Houston, TX 77207. Minimum Age requirement 16 years and must have parental permission if under 18 years of age.