

U.S.S. LITTLE ROCK ASSOCIATION MEMBERSHIP APPLICATION PAGE

(Keep the Association informed of any address changes)

Name: _____
(Last) (First) (MI)

Spouse's Name: _____

Street: _____ Apt. _____

City: _____ State: _____ Zip: _____

Date of Birth: _____

Home Phone: (____) _____ Business / Work: (____) _____

E-mail Address: _____

Do you want your e-mail address added to the website? Yes: or, No:

Please Note: There are five (5) categories for membership and you must select the one that accurately reflects your status to be accepted into the U.S.S. Little Rock Association. Please check the box for only one category.

All applications are subject to approval from the Board of Directors of the U.S.S. Little Rock Association. Only members of Classes A and B are eligible to serve as Officers or Directors of the Association and to vote at the Association's Annual Meetings. However all memberships are welcome to attend the annual reunions. All memberships are subject to annual renewal except Class A and B Lifetime Members.

Your membership status will not be disclosed at any time except for official Association business. Membership lists are not provided to any other entity.

CLASS A: Shipmate Any honorably discharged Navy or Marine Corps veteran who served on the U.S.S. Little Rock at anytime between 1945 and 1976.

Branch of the Service: Navy: or, Marine Corps:

Dates on Little Rock: From: _____ To: _____

Division(s): _____ Rank: _____

Plank Owner?: Yes: No: Year?: 1945: or, 1960:

Were you on a Decommissioning Crew?: Yes: or No:

If so, what year ? : 1949 or, 1976

Type of Membership: (Check One Box): Annual (\$25.00 / year)
or Life (\$100.00 / CL-92): or, Life (\$200.00 / CLG-4):

U.S.S. LITTLE ROCK ASSOCIATION MEMBERSHIP APPLICATION PAGE (Pg 2)

CLASS B: Veteran Any honorably discharged Navy, Marine Corps or Coast Guard veteran who did not serve on the U.S.S. Little Rock.

Branch of Service: Navy: USMC: USCG:

Ship(s) served on: _____

Dates of Service: From: _____ To: _____

Highest rate / rank achieved: _____

Type of Membership: (Check one box): Annual (\$25.00 / year):
or Life (\$200.00):

CLASS C: Associate This class open to any applicant, civilian or military. Annual Memberships only. (\$10.00 / year):

CLASS E: Widow or Surviving Spouse This class is open to any applicant whose deceased spouse served on the USS Little Rock any time between 1945 and 1976 and received an Honorable Discharge. Annual Memberships only. (\$5.00 / year):

CLASS F: Junior Associate This class is open to any applicant between the ages of 10 and 21. Annual Memberships only. (\$10.00 / year):

Based on the above information I am applying for membership in the **U.S.S. LITTLE ROCK ASSOCIATION**.

(SIGNED)

(DATE) _____

Please make all membership checks payable to "USS Little Rock Association".
Please send your check and completed Application Form to:

U.S.S. LITTLE ROCK ASSOCIATION
c/o Frank Berglas
10 Bayberry Lane
South Salem, NY 10590-1414