

**St Michael Parish Veterans Network Membership Information**

**Name** \_\_\_\_\_ **Spouse** \_\_\_\_\_

**Voice Phone Number** \_\_\_\_\_

**Text Phone Number** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Postal Address** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Branch of Service** \_\_\_\_\_

**Years of Service** \_\_\_\_\_

**Notes** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Participation Activity Preference (check as many as you prefer)**

**Rosary**  **Mass**  **Cemetery**  **Other**  \_\_\_\_\_