

**7/17 Air Cavalry Association  
Application for Membership**

Fill out and mail to:  
Donald Schoenemann  
3517 Harvey Lake Road  
Highland, MI 48356-1138

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

TROOP/UNIT: \_\_\_\_\_

SECTION/  
PLATOON: \_\_\_\_\_

YEARS IN 7/17: \_\_\_\_\_  
(like 1969-1970)

How did you learn about the 7/17 Air Cavalry Association? (Veteran friend, website, etc.)  
\_\_\_\_\_

Tell us about others we can contact: \_\_\_\_\_  
\_\_\_\_\_

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SCHOLARSHIP FUND \$ \_\_\_\_\_

TROOPER FUND \$ \_\_\_\_\_

MEMBERSHIP Join or renew 1 YR \$10 / 3 YRS \$25 / LIFE \$100 \$ \_\_\_\_\_

**TOTAL** ----- \$ \_\_\_\_\_