

Won't You Join Us?

THE OLD GUARD, INC.

Membership Application

Date of induction : / /

Date entered by Membership Chair

Name:

Nickname:

Birth Date: Address:

Home Phone:

Cell Phone:

Email Address:

Old Guard Sponsor:

Personal Interests/Affiliations/Memberships:

Volunteer Interests:

Family Information/Spouse's Name/Children:

Professional and Educational Background:

Please complete the above and return it to Mike Cabrey, Membership Chair, 247 Terry Rd, Hartford, CT 06105. You will receive an invoice payable to The Old Guard after induction. Mike can be contacted with any questions at mikecabrey@me.com