

**EAST COAST DRILL INSTRUCTORS ASSOCIATION
PARRIS ISLAND CHAPTER
PO BOX 5117
PARRIS ISLAND, SOUTH CAROLINA 29905
MEMBERSHIP APPLICATION**

(Please Circle One)

NEW/RENEWAL Membership

MEMBERSHIP # _____

Name: _____
(Rank) (First) (Middle) (Last)

Address: _____

(This address should be where all correspondence should be mailed to)

Phone: () _____
Area Code

Dates Of Tour as a DI: _____ Where: _____

Dates on Active Duty: _____

DI School Graduates please indicate Class Number: _____
(For example: 4-05)

I certify that the information provided on this application is true and correct to the best of my knowledge.

(Signature) (Date)

NOTE: Your membership card will be mailed to the address listed on this application. Dues are \$25.00 annually. Please notify us of any address change.

Mail directly to SgtMaj Ken Miller at: 804 Lynview St. NE, Lenoir, NC 28645 to expedite.