

**HMM-265 VETERANS ASSOCIATION, INC.**  
**2015 Reunion Cruise**  
**Registration Sheet**

**NAME:** \_\_\_\_\_ **E-mail Address:** \_\_\_\_\_

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

**TELEPHONE NO.** \_\_\_\_\_

**CELL PHONE NO.** \_\_\_\_\_

**GUEST NAMES:** \_\_\_\_\_  
\_\_\_\_\_

**NAMES/NICKNAMES AS YOU WISH**

**THEM TO APPEAR ON NAME TAGS:** (You) \_\_\_\_\_

(Guest) \_\_\_\_\_

(Guest) \_\_\_\_\_

**RESERVED CABIN NO.** \_\_\_\_\_

Association registration fee required to defray costs of  
mailings, name tags, and misc. costs @ \$15.00 per person = \$ \_\_\_\_\_

Tax deductible optional Association contribution = \$ \_\_\_\_\_

Total amount due = \$ \_\_\_\_\_

Please mail this form and your total amount due to:  
(Make checks payable to HMM-265 Veterans Association, Inc.)

Garry D. Kerr  
12097 SE 175 Loop  
Summerfield, FL 34491