

Union Patriotic League

APPLICATION FOR MEMBERSHIP



NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

EMAIL _____

PHONE NUMBER _____

DATE OF BIRTH _____

MEMBERSHIP LEVEL BEING APPLIED FOR :

(CHECK ONE)

FULL ___ **ASSOCIATE** ___ **FAMILY** ___

THE PRIMARY MISSION OF THE UNION PATRIOTIC LEAGUE IS TO EDUCATE THE PUBLIC REGARDING THE LIVES AND WORK OF AMERICAN CITIZENS DURING THE MID-1800'S. WE ACHIEVE THAT GOAL BY SPONSORING AND PARTICIPATING IN LIVING HISTORY DEMONSTRATIONS. A SECONDARY GOAL IS TO CONTRIBUTE TO THE PUBLIC'S AWARENESS OF THE IMPORTANCE OF HISTORIC PRESERVATION AND TO SUPPORT THAT CAUSE, AS WELL.

PRIOR RE-ENACTING EXPERIENCE

UNIT	US/CS	ELECTED POSITION?	STILL MEMBER?
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**PLEASE DESCRIBE ANY IMPRESSIONS OR DEMONSTRATIONS THAT YOU DO:
(MUSIC, LAUNDRESS, ETC)**

**PLEASE DESCRIBE ANY IMPRESSION, WHICH YOU WOULD LIKE TO
DEVELOP:**

**I CERTIFY THAT THE INFORMATION PROVIDED ON THIS FORM IS CORRECT
AND THAT I WILL ABIDE BY ALL UNION PATRIOTIC LEAGUE REGULATIONS
AND THAT INCORRECT INFORMATION AND/OR FAILURE TO ABIDE THE
LEAGUE REGULATIONS ARE GROUNDS FOR DISMISSAL FROM THE UNIT. I
REALIZE THAT I WILL HAVE PROBATIONARY STATUS AND THAT MY FINAL
MEMBERSHIP STATUS WILL BE VOTED UPON AT THE END OF THE
PROBATIONARY PERIOD.**

SIGNED

DATE

**PLEASE RETURN TO:
CASEY O'CONNOR
UNION PATRIOTIC LEAGUE
491 BALTIMORE AVE # 513
SPRINGFIELD, PA, 19064
AnMadraRua@aol.com**

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