

Confederate States Marine Corps

Enlistment Application

The Confederate States Marine Corps, Co. B., is a Not for Profit Historical Re-enactment Group, dedicated to Historical preservation, Education and the principals of discipline and Honor which distinguished the original corps during the period between 1861 and 1965.

I understand that by submitting this application, I am agreeing to support the goals of this organization and its Constitution and by-laws. I further recognize the Military nature of this organization and agree to submit to all lawful orders and duties assigned to me by duly appointed superior Officers or Non-Commissioned Officers.

Dues structure: Adult: \$20.00 Intermediate: \$10.00 Junior: Free

Please make check payable to: Company B. C. S. Marine Corps

Adult Application [] Intermediate [] Junior [] Military [] Civilian []
(18 yrs of age or older) (11-18 yrs of age) (under 11 years)

Name _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone (H): () _____ (W) () _____ (O): () _____

S.S.N.: (Necessary for Insurance purposes) _____ Military Service: _____
Branch & M.O.S.

Education: _____ Profession: _____

Special Skills or Interests: _____

Emergency Phone Number: () _____ Name: _____

*In the event of any Emergency, do you have any special medical conditions that the Officers should be aware of? _____
If "Yes" please contact one of the Emergency Officers. The existence of a Special Medical Condition **DOES NOT** disqualify anyone from participation. The information is requested for your protection.*

Signature: _____ Date: _____

Official use only

Application Declined: _____, 20____ (Date)

Assigned to Duty: _____, 20____ (Date)

Rank: _____ Unit: _____

Authorization: _____, Commanding