

**VETERANS INFORMATION FORM**

**PLEASE PRINT**

**FILL OUT THE NEXT THREE LINES ONLY IF PROVIDING INFORMATION ABOUT A VETERAN**

YOUR NAME \_\_\_\_\_

YOUR TELEPHONE NUMBER \_\_\_\_\_

YOUR EMAIL ADDRESS \_\_\_\_\_

DATE \_\_\_\_\_

NAME OF VETERAN \_\_\_\_\_

TELEPHONE NUMBER OF VETERAN \_\_\_\_\_

EMAIL ADDRESS OF VETERAN \_\_\_\_\_

IS THIS A NEW NAME TO BE ADDED? (YES) \_\_\_\_\_

IS THIS A MERCHANT MARINE? (YES) \_\_\_\_\_

IS THIS A GREEK MILITARY? (YES) \_\_\_\_\_

BRANCH OF MILITARY SERVICE \_\_\_\_\_

DATES OF MILITARY SERVICE (mm/dd/yyyy thru mm/dd/yyyy) \_\_\_\_\_

NAME OF HOSTILITY (OR ENTER "PEACETIME") \_\_\_\_\_

**Hostilities are: WWI, WWII, Korean War, Viet Nam, Desert Storm, Operation Iraqi Freedom and Afghanistan.  
Place all other hostility names in the "OTHER INFORMATION" section, below.**

OTHER INFORMATION (OR A SUGGESTION FOR CONSIDERATION) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PLACE THE ABOVE FILLED OUT FORM IN AN ENVELOPE AND EITHER MAIL IT TO:**

**THE ORDER OF AHEPA  
VETERANS COMMITTEE  
ST SOPHIA CHURCH  
440 WHITEHALL ROAD  
ALBANY, NY 12208**

**OR**

**DROP THE ENVELOPE OFF AT THE SAINT SOPHIA CHURCH OFFICE**