



UKRAINIAN AMERICAN VETERANS, INC.

UAV NATIONAL REGISTRY

PO BOX 172

Holmdel, NJ 07733-0172

uav.registration@verizon.net

www.uavets.org Official



UAV REGISTRATION or APPLICATION FORM

For Ukrainian American veterans of active duty, Reserve, National Guard, living or deceased.

PLEASE PRINT OR TYPE ALL INFORMATION.

Last Name: _____ First Name: _____ (_____)
put maiden name if applicable

Address: _____ ID# _____

City: _____ State: _____ Zip Code: _____

Daytime phone: () _____ evening: () _____ cell: () _____

fax: () _____ e-mail: _____

Birthday: / / / / Place of Birth _____ If Deceased / / / /
month day year month day year

When did you and/or your ancestors arrive in the USA? _____ From which country? _____

When did you and/or your ancestors become USA citizens? [] _____ (indicate year)
myself ancestor

Your Ukrainian ancestry is on your [] mother's side [] father's side [] both [] spouse

Your mother's maiden name: _____

Are you UAV member ? _____ if yes, UAV Post # _____ Other US Veteran's Organization _____

Branch: (circle) USA USN USMC USAF USCG WWII-USMM WWII-AAF

SERVICE DATES - including active duty, Reserve, and National Guard (copy DD Form 214 or equivalent)

From: _____ to _____

From: _____ to _____

From: _____ to _____ Reserve

Military Decorations: _____

Highest Rank or Grade: _____ If deceased, place of burial _____

Other: _____

[] Retired from military service

[] Photo taken in uniform enclosed, if available - no photocopier prints, please.

If registered by other than above, please indicate relationship to the veteran being registered: _____

If you have memorable military experiences, please write on the back of this page. Your short autobiography will be appreciated.

Date _____ Signature: _____

Please return entire form with a copy of DD Form 214 (or equivalent) and photo to the above address.

Thank you.

You do not have to be a member of the Ukrainian American Veterans to register

(2016)