

West Nova Scotia Regiment - Regimental Association

WNSRRA Secretary 5086 Hwy 357 Elderbank, NS B0N 1K0

Applicant Information

Serving West Novas – Past and Present

		Cor	ntact Informa	ation	
Please Print					
Full Name:					()
i dii Name.	Last		First	Middle	(Called)
0: : 4.11					
Civic Address:	Street Address				Apartment/Unit #
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	City/Town		Province	Postal Code	
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Mailing Address: Same as above					
	Street Address				Apartment/Unit #
	City/Town		Province	Postal Code	
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Birthdate:	DD MM	YYYY	Spouse's Name:		
Spouse's Name:					
Military Background Information					
Service					
From	То	Unit	and Location	-	Trade/Position
Additional information may be included here. If more space is required, please use back of form.					
					
Applicant Signature			Date		

Please submit Annual Dues (\$30) with application, or by cheque to **WNSR Regimental Association**, mailed with the application.

NOTE: Dues may be paid electronically via http://WNSR.ca/RA