

United States Naval Academy Hudson Valley Parents' Group Membership Form



Parent Information

Parent/Member #1	Parent/Member #2
First Name:	First Name:
Last Name:	Last Name:
Street Address:	Street Address:
City, State, Zip:	City, State, Zip:
Preferred Phone:	Preferred Phone:
Preferred Email:	Preferred Email:
Midshipman Information	
First Name:	USNA Graduation Class:
Last Name:	Company:
Box #:	DOB:
communication of ongoing USNA activities is free. Participation is recommended to midshipmen throughout the year. HVPG	offers support for parents and their midshipmen through es, information sharing, and regional events. Membership provide a way of sharing encouragement with our officers and members are volunteers who donate their and all incoming Hudson Valley Naval Academy Families.
	lease email completed form to:
Beth Morretta at bethmorretta@icloud.com	