

## 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:
Email:	
The USNA Hudson Valley Parents Groucommunication of ongoing USNA activity is free. Participation is recommended midshipmen throughout the year. HV	up offers support for parents and their midshipmen through vities, information sharing, and regional events. Membership to provide a way of sharing encouragement with our PG officers and members are volunteers who donate their oup and all incoming Hudson Valley Naval Academy Families.
_	Please email completed form to:
Ragi	rel Futia raquelrenee2003@icloud.com