

AHS Veterans

PLEASE PRINT CLEARLY

Veteran first middle last _____

Address _____ City _____ State _____ ZIP _____

Telephone () _____ -Email _____

Place of Birth _____

AHS graduation year _____

AHS favorite experience
(Optional) _____

Family info.(Optional) _____

Branch of Service or Wartime Activity _____

Commissioned Enlisted Drafted Service dates _____ to _____

Rank _____

Unit, Division, Battalion, Group, Ship, etc. (Do not abbreviate.) _____

War, operation, or conflict served in _____

Locations of military or civilian service _____

Battles/campaigns (please name) _____

Medals or special service awards. If so, please list (be as specific as possible): _____

Special duties/highlights/achievements _____

Was the veteran a prisoner of war? Yes No _____

Military stories _____

Please use reverse or additional sheet for additional information.

PHOTOGRAPH # 1 Place _____

Date _____ month/day/year

Photo Desc. _____

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Serve, Preserve, Honor