

27th Annual

TRIBUTE TO WOMEN IN THE MILITARY



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Giving Back

Friday, 2 March 2012

Mountain View Club • Kirtland AFB • Albuquerque, New Mexico

**0800 hrs – Registration Opens, Exhibits, Refreshments,
Networking**

0900 hrs – Opening Ceremonies

1130 hrs – Luncheon

Keynote Speaker

Dr. Betty Moseley Brown

(Associate Director for the Center for Women Veterans)

Tribute XXVII Chair: Yolanda Robinson-Freeman, USAF/Ret

Registration Info: Ms. Ethel Tilley (505) 853-1718

www.TributeToWomenInTheMilitary.org

Three \$500 scholarships will be given out!

Scholarship Applications must be received by 17 Feb 2012

(Registration forms and Scholarship Program information can be found on our website)

BASE CO-SPONSOR

Kirtland AFB Top 3 Association

PRINT CLEARLY

ONLY ONE NAME TO A FORM. MAKE A COPY FOR ADDITIONAL ATTENDEES or COPY ALL INFO BELOW TO A SEPARATE SHEET OF PAPER.

- FREE for World War II Veterans (must fill out form & indicate as WWII vet)**
- \$ 17 – Regular Registration must be received before 15 February 2012**
- \$ 10 – AD Enlisted E-1 thru E-4 Only**
- \$25 – Regular registration after 15 February 2012**
- \$ _____ – Contribution to the Tribute** (Please indicate if it is in honor or memory of someone)
In Honor (living) of _____ Branch/Rank _____
In Memory (deceased) of _____ Branch/Rank _____

Total Amount Enclosed: \$ _____ Payable to WOMEN IN THE MILITARY
Checks or money orders only. No cash. The TRIBUTE is a private organization and is unable to accept credit cards. Indicate any additional names if included in your check payment:
_____.

NAME (first, MI, last) & Rank:	E-mail address: (print clearly)
ADDRESS: Is this a change? <input type="checkbox"/> Yes <input type="checkbox"/> No Street: Space/Apt #: City, State, ZIP:	ERA (circle one): WWII Korea Cold War/Vietnam Gulf 1 OIF/OEF BRANCH (circle one): ARMY AIR FORCE NAVY USMC CG PHS NOAA STATUS (circle 1 or 2): AD Reserve Guard Civilian Retired Veteran (not retired) Other _____
PROVIDE COMPLETE 10-DIGIT NUMBERS Work/Daytime Phone: () Evening Phone: ()	Please select your lunch entrée (check one): <input type="checkbox"/> Sliced Roasted Strip Loin of Beef <input type="checkbox"/> Marinated Chicken Breast <input type="checkbox"/> Vegetarian's Twist (Lasagna)
Do you have access to the base?* <input type="checkbox"/> Yes <input type="checkbox"/> No <small>If no please provide you're the last 4 digits of your social security number.</small>	Is this your first TRIBUTE: <input type="checkbox"/> Yes <input type="checkbox"/> No
THOSE WITH SPECIAL NEEDS/CAREGIVERS: If you have a caregiver who will be accompanying you, you will need to register and pay for that person as well.	Please make the check or money order (no cash) payable to: WOMEN IN THE MILITARY P O BOX 91775 Albuquerque NM 87199-1775