



**The King's Own Calgary Regiment (50CEF/14CTR) Association**  
c/o 4520 Crowchild Trail SW  
Calgary, AB T2T 5J4

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## Application Form / Membership Record

Printed Name: (First/Last) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

E-Mail Address(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_

Phone Number(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_

Preferred method of contact:      email       phone       post

Alternate Contact (in the event we are unable to reach you)

Name: (First/Last) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

E-Mail Address(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_

Phone Number(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_

Your Regimental Particulars:

Service Number: \_\_\_\_\_ Rank: (current or on retirement) \_\_\_\_\_

Medals, Decorations: \_\_\_\_\_

Unit (If not King's Own, current or attach-posted from): \_\_\_\_\_

Period of Service with The King's Own: From \_\_\_\_\_ to \_\_\_\_\_

If not a former or serving member, your relationship to the Regiment: (eg. "general supporter" or "daughter of Cpl Jones who served with the Regiment from 1961 -1975")

Dues Enclosed: Second World War Veteran or Spouse: \$1.00  All others: \$10.00

Additional Donation Amount Enclosed: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use: Membership Card Issued on (date) \_\_\_\_\_

Note: When completed, please mail this form to the Association at the address above noted on Crowchild Trail. Or, you may e-mail the form to [KOCalgRAssociation@gmail.com](mailto:KOCalgRAssociation@gmail.com), or fax it to 403-249-9343.