



# ID CARD FORM

ALL INFORMATION IS REQUIRED  
TO CREATE YOUR CARD

Please insert information on each line:

1. Status (Circle One):      ACTIVE      LIFE      HONORARY      COMMODORE

2. Name: \_\_\_\_\_  
(First, Middle Initial, Last)

3. Employee ID and Flotilla: \_\_\_\_\_  
(Member Number – 7 digits, Flotilla)

4. Qualification Status (Circle One):      IQ      BQ      AX

5. Date of Birth: \_\_\_\_\_  
(Month, Day, Birth Year)

6. Weight: \_\_\_\_\_

7. Height (In inches): \_\_\_\_\_

8. Hair Color: \_\_\_\_\_

9. Eye Color: \_\_\_\_\_

10. Blood Type: \_\_\_\_\_

11. Base Enrollment Date: \_\_\_\_\_