

**· Retiree Activities Office (RAO) ·**

HQ Joint U.S. Military Advisory Group, Thailand

Building "D", Room D-114  
Tel: 02-287-1036 Ext. 165  
Email: [raothailand@jussmagthai.org](mailto:raothailand@jussmagthai.org)

We maintain a Contact Roster for members we provide Service to and distribute our Newsletter to. The info we request is designed to help us to assist you now, and to aid survivor assistance later.

>>> To Register: Please Complete In Its Entirety <<<

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

Name: Last, First M.I.: \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Rank: \_\_\_\_\_ Grade: \_\_\_\_\_ SSN: \_\_\_\_\_  
(Optional)

Birth Month & Year: \_\_\_\_\_ Status:  Retired  Gray-Area Retiree

Box-R # \_\_\_\_\_ Medicare Part B?  Yes  No SBP Premiums?  Yes  No

Residence: \_\_\_\_\_ Home Tel: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Receiving?  SSA  VA  OPM  Other: \_\_\_\_\_ Life Insurance?  Yes  No

Vietnam War (In Vietnam / Thailand)  Korea (DMZ Apr '68-Aug '71)  Gulf War

Location of Records (Military, Marriage (current), Birth (minor children), Divorce (sponsor & spouse), Will, Vital, Personal, etc.):

**\*\*\* DEPENDENTS \*\*\***

Married (please fill in below)  Single  Divorced  Widower / Widow

Spouse (First Name): \_\_\_\_\_ Birth Name: \_\_\_\_\_

Spouse:  SSN  ITIN: \_\_\_\_\_ DoD ID Card Exp Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date Married: \_\_\_\_\_ Spouse Citizenship: \_\_\_\_\_

Minor Children (Name & DOB):

**\*\*\* IN U.S.A.: NEXT OF KIN / EMERGENCY \*\*\***

Next of Kin: \_\_\_\_\_ Home Tel: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency: \_\_\_\_\_ Home Tel: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Email: \_\_\_\_\_

Continue on Reverse if needed. (The information in our roster is protected by the Privacy Act of 1974.)