



# Apprentice Alumni Association

P.O. Box 812, Newport News, Virginia 23607  
Website: [www.nnaprentice.com](http://www.nnaprentice.com) • Email: [Alumni@nnaprentice.com](mailto:Alumni@nnaprentice.com)

**Lynné Cave**, President • **Fred Peedle**, Vice President/Membership Secretary  
**Sarah Gentry**, Corresponding Secretary • **Kimberly Jordan-Dillard**, Recording Secretary • **Anita McCray**, Treasurer

## 2020 MEMBERSHIP FORM – HII MECHANICAL

Please complete and return the form, with a \$25 check payable to **AAA**, to Fred Peedle, E51, B902-1

Name: \_\_\_\_\_  
*First Name* *Middle Name* *Last Name* *Suffix*

Last Name at Graduation if different than above: \_\_\_\_\_ Nickname: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

If Applicable: Current Dept.: \_\_\_\_\_ Current Bldg.: \_\_\_\_\_

### Apprentice Graduation Information

Graduating Class Year: \_\_\_\_\_ Graduating Trade Name/Dept.: \_\_\_\_\_

Home Town: \_\_\_\_\_ Home State: \_\_\_\_\_

Please contact me about Alumni Volunteer Opportunities: (Circle One) Yes No

**Please list the Alumni Association Representative that assisted you with enrollment:** \_\_\_\_\_

## 2021 PAYROLL DEDUCTION FORM

***If you would like to pay your future dues by Payroll Deduction and receive an Alumni coin, read the below statement and then sign, date, list your PERNR number and Current Dept. number.***

By my signature below, I authorize a payroll deduction of \$25.00 to be paid on my behalf to the Apprenticeship Alumni Association for annual dues. I understand that the Payroll Department will make this deduction starting in **2021** and that the deduction will continue annually until such time as my employment terminates or this authorization is cancelled by me in writing. I further understand that any question as to the correctness of the amount deducted shall be resolved between me and the club, and that the Company will not be responsible for making corrections to deducted amounts, except in the case of clerical errors, which the Company will adjust promptly.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ PERNR: \_\_\_\_\_ Current Dept. Number: \_\_\_\_\_