Liberty Greys Corps of Cadet Application 6th Regiment, 1st Division Army of Northern Virginia

Cadet					_	
	Last		First	M	Ī	
	Address:					
	Address:Street &	# Apt.		City	State	Zip
	Phone: ()		E-	mail:		
	D.O.B/_					
	responsibility to f		of the Corps	s of Cadet to the	best of my abili	ty, and to
Cadet Signature			Date/			
Parent	t/Guardian					
	Last		Fir	rst	MI	
	Address:Street &					
	Street &	# Apt.		City	State	Zip
	Phone: () -		E-	mail:		
duties	parent/guardian of for age appropria we duties on the ba	te civil war mil				
Parent	t/Guardian Signati	ure				
Spons	or Unit					
Unit F	Representative (Of	ficer or NCO)				
Repre	sentative Phone (_)	_			
Repre	sentative Email _					
war m	e unit Representatilitary service. The training sessions.					
Unit F	Representative Sig	nature				