

Spouse: \_\_\_\_\_

Date & Place of Marriage: \_\_\_\_\_  
(Date) (City)(County)(State/Country)

Other Spouses: \_\_\_\_\_

Children: (please list name, birthdate, spouse)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

(Please attach separate sheet for additional children)

All residences of participants: \_\_\_\_\_

SUBMITTED BY:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Relationship to Participant: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

***Military Registry is a project of the Van Buren Regional  
Genealogical Society, P.O. Box 143, Decatur, MI 49045***

VBRGS Use Only:

Date Received: \_\_\_\_\_ Category/#: \_\_\_\_\_

Approved by: \_\_\_\_\_

Notes: \_\_\_\_\_