## Moselle River 1944 - REPLY COUPON - November 2019

## YES!

I am interested in taking part in the 75<sup>th</sup> Anniversary Commemoration in November 2019 as organized by the Association Moselle River 1944. I understand that filling in this form does not at this stage place me under any obligation.

First name	Last name	
Street Address	at till an and the	
City	State	Zip code
	Telephone	
Country	Home Mobile	
E-mail		
Are you a <mark>Veteran (Yes / N</mark>		
If No, also <mark>enter Veteran's</mark>	name	
Veteran's unit ( <mark>Division</mark> , R	egiment/Battalion)	
I will be accompanied by (	names)	
Any special dietary needs	?	UVER
Any spe <mark>cial medical n</mark> eeds	s or restrictions on mobility?	
Any special place you wou	Ild like to visit?	
Signed by		Date
• Just type your name in the	e box above • Save the PDF and e-ma	il it as shown below
Please complet	te the form, save the PDF, attach it to a	n email and send to this
	email address: info@moselleriver19	944.org

– OR – you may print the PDF and send it via postal mail to:

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