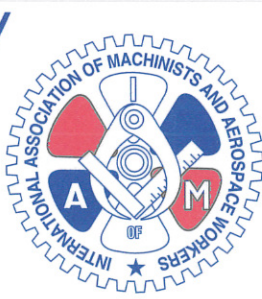


**International
Association of
Machinists and
Aerospace Workers**



9000 Machinists Place
Upper Marlboro, Maryland 20772-2687

Area Code 301
967-4500



OFFICE OF THE INTERNATIONAL PRESIDENT

May 23, 2018

Subj: Veterans Services Program
September 30 – October 5, 2018

Dear IAM Veteran:

The Veterans Services Department is convening its 2018 Veteran's Services Program at the William W. Winpisinger Education and Technology Center. Orientation will be held on Sunday, September 30, 2018, at 6:00 p.m. The program will conclude on Friday, October 5, 2018.

This is a special invitation for you to attend the program. If you will be traveling on a commercial airline, you should be prepared to travel and arrive on Saturday, September 29, 2018. All participants must be at the Winpisinger Center no later than 4:00 p.m. on Sunday, September 30, 2018. Please do not make your own flight reservations; the Winpisinger Center will send you further instructions on travel.

Please complete the enclosed "Participant Registration Form" and forward to the IAM Veterans Services Department, 9000 Machinists Place, Room 303 Upper Marlboro, MD 20772, **no later than Monday, July 30, 2018.**

In solidarity,

Robert Martinez, Jr.
International President

RM/amh

Enclosure

cc: Executive Council
Director C. Wagoner
Director C. San Miguel

2018 Departmental Program
Participant Registration Form
William W. Winpisinger Education and Technology Center

Veterans Services Program
September 30 through October 5, 2018

Participants should be prepared to travel and arrive on Saturday, September 29, 2018 if travel is by commercial airlines. All participants must be at the Winpisinger Center no later than 4:00 PM on Sunday, September 30, 2018.

Mandatory – The following information must be filled in



"Pull out your
Driver's

Full Legal Name (as printed on your ID)
Verify your name is as it appears on your Driver's License or Passport that you are presenting as identification at the airport.

First Name: _____ Middle: _____
Last Name: _____
Nickname: _____ Date of Birth: _____
Title: _____ Local Lodge: _____ District Lodge: _____
Gender: _____ Territory: _____
Mailing Address: _____
City: _____ Province/ State: _____ Postal Code/ Zip Code: _____
Home Phone: _____ - _____ Work Phone: _____ - _____
Cell Number: _____ - _____ Fax Number: _____ - _____
E-Mail Address: _____
Last 4 digits of SSN/SIN: _____ IAM Book No.: _____

RETURN THIS FORM TO:

Carlos San Miguel, Director
IAM Veterans Services Department
9000 Machinists Place, Room 303
Upper Marlboro, MS 20772

Phone: (301) 967- 4569 Fax: (301) 967- 4507

Via Angela Hemler's email at: ahemler@iamaw.org

RETURN FORM NO LATER THAN: JULY 30, 2018