

Unit: 053 - \_\_\_\_\_

EMPLID: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Blood Type: \_\_\_\_\_ Weight (lbs) \_\_\_\_\_ Height (inches): \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Expired Card: ( Y / N )

Lost - Stolen Card - Other: ( Y / N ) If **Yes**, explain on next line:

Explanation of circumstances: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Member Signature / Date

FC Endorsement: \_\_\_\_\_ OR Email via: [D5NRDIRAUX@USCG.MIL](mailto:D5NRDIRAUX@USCG.MIL)

FC Signature / Date