

# STRONG BONDS IOWA REGISTRATION

For use of this form, see AR 608-18; the proponent entity is NGIA-PER-CH

## DATA REQUIRED BY THE PRIVACY ACT OF 1974

**AUTHORITY:** Title 5, Section 3012; Title 10, USC, E.O 9397.

**PRINCIPAL PURPOSE:** To register for a Strong Bonds Program Event/Retreat event on his or her behalf or on behalf of his or her family.

**DISCLOSURES:** Voluntary.

**TO:** Office of the Staff Chaplain, Iowa NG  
ATTN: NGIA-PER-CH (Strong Bonds)  
Bldg A-1, Ste 186-N, Camp Dodge  
7105 NW 70<sup>th</sup> Avenue  
Johnston, Iowa 50131-1824

**FROM:** [Name & Address of Servicemember] (Include ZIP Code)

## SECTION I – SERVICEMEMBER INFORMATION

<b>NAME</b> (Last, First, MI)	<b>Rank</b>	<b>AKO/DKO or home (whichever used) eMail Address</b>	
<b>HOME PHONE</b> (Include Area Code)	<b>CELL PHONE</b> (Include Area Code)	<b>WORK PHONE</b> (Optional) (Include Area Code)	

## SECTION II – UNIT

<b>CURRENT UNIT OF ASSIGNMENT</b> (Attachment)	<b>Army</b>	<b>Air</b>	<b>LOCATION</b> (City & State)

## SECTION III – SPOUSE INFORMATION (WHEN APPLYING FOR STRONG BONDS COUPLES or FAMILIES)

<b>NAME</b> (Last, First, MI)	<b>Home eMail Address</b>		
<b>CELL PHONE</b> (Include Area Code)	<b>WORK PHONE</b> (Optional) (Include AC)	<b>Work eMail Address</b> (Optional)	

## SECTION IV - EVENT REGISTRATION

I wish to register for the following Strong Bonds event: (Check as appropriate)

### MARRIED COUPLES

<b>Prevention &amp; Relationship Enhancement Program</b> July 27-28, 2013 - Waterloo	<b>Laugh Your Way to a Better Marriage</b> July 19-20, 2013 - Sioux City September 7, 2013 - Camp Dodge (1 day only)
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### FAMILIES

<b>7 Habits of Highly Effective Military Families</b> July 13-14, 2013 - Moravia, IA <b>HOW MANY CHILDREN 6 yr &amp; above will you be bringing?</b> (Please list ages separated by comma)	<b>Active Military Families</b> September 14, 2013 - Iowa City (1 day only) <b>HOW MANY CHILDREN 6 yr &amp; above will you be bringing?</b> (Please list ages separated by comma)
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### SINGLES

<b>Got Your Back</b> February 16-17, 2013 - Dubuque Area
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## SECTION V – HOTEL or LODGING PREFERENCES (Check as appropriate)

Will need a Room for Friday night	Nonsmoking	One King or one Queen
Handicap Accessible Room	Smoking (If Available)	Two Queen or two Full

## SECTION V

I certify that the information (Section I, II & III) for the Strong Bonds registration (Section IV) contained herein has been verified.

<b>SERVICEMEMBER</b> (Type Name as Signature)	<b>Please save a copy of this form and email to the address below:</b> <del>eric.p.christoffel@us.army.mil</del> eric.p.christoffel.mil@mail.mil	<b>DATE</b>