



**WWII HISTORICAL REENACTMENT SOCIETY
APPLICATION FOR UNIT CHARTER
WORLDWARTWOHRS.ORG**



PART ONE:

UNIT DESIGNATION: _____
DIVISION, REGIMENT, BATTALION, COMPANY, PLATOON

NATIONALITY: _____

UNIT COMMANDER INFORMATION

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

PHONE NUMBER _____ **EMAIL** _____

I have read the by-laws, safety regulations, and authenticity regulations ___ Initial

As unit Commander and official representative of the unit, I do hereby agree and affirm to abide by the written policy of the unit; and, that the unit will abide by the bylaws, safety, and authenticity rules of the WWII Historical Reenactment Society Inc.

SIGNATURE _____ **DATE** _____

UNIT CO-COMMANDER INFORMATION

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

PHONE NUMBER _____ **EMAIL** _____

I have read the by-laws, safety regulations, and authenticity regulations ___ Initial

As unit Co-Commander and official representative of the unit, I do hereby agree and affirm to abide by the written policy of the unit; and, that the unit will abide by the bylaws, safety, and authenticity rules of the WWII Historical Reenactment Society Inc.

SIGNATURE _____ **DATE** _____



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PART TWO:

PLEASE INCLUDE THE FOLLOWING:

1. STATEMENT OF PURPOSE AND GOALS FOR REENACTING.
2. AT LEAST A TWO PAGE HISTORY OF THE UNIT TO INCLUDE CAMPAIGNS, AWARDS, AND DISTINCTIVE INFORMATION ABOUT THE ORIGINAL UNIT DURING 1939-45 WITH REFERENCES THAT INCLUDE AUTHOR, TITLE, PUBLISHER, AND PAGES CITED. A PAGE PRINTED FROM A WEBSITE IS UNACCEPTABLE.
3. CURRENT UNIT PICTURE AND UNIT WEBSITE IF AVAILABLE.
4. UNIT ORGANIZATION.
5. AUTHORIZED UNIFORM, EQUIPMENT, AND VEHICLE LIST ALONG WITH DOCUMENTATION FOR ANY SPECIAL OR UNUSUAL ITEMS.
6. RANK, PROMOTION, AND UNIT AWARD STRUCTURE.
7. CONTACT INFORMATION TO INCLUDE PHONE NUMBER, ADDRESS, AND EMAIL FOR THE UNIT COMMANDER, CO-COMANDER, SAEFTY OFFICER, AUTHENTICITY OFFICER, AND PUBLIC RELATIONS OFFICER.
8. UNIT ROSTER OF AT LEAST 5* CURRENT HRS MEMBERS THAT ARE OVER AGE 18. PLEASE INCLUDE HRS NUMBERS AND MEMBERSHIP IN OTHER UNTS.
9. A STATEMENT OF INTENTION FOR FOLLOWING THE SOCIETY'S BY-LAWS, SAFETY REGULATIONS, AND AUTHENTICITY REGULATIONS.
10. APPROVAL FROM OVERLAPPING DIVISIONAL UNITS.

PART THREE:

Safety and Authenticity Committee Approval

Accept _____ Deny _____ Signature _____ Date _____

Board of Directors Approval

President Y ___ N ___ Signature _____ Date _____

Vice President Y ___ N ___ Signature _____ Date _____

Secretary Y ___ N ___ Signature _____ Date _____

Please mail a printed copy and email a copy to the WWIHR Vice President. Within 30 days your charter will either be approved, rejected with explanation, or sent back for amendments to the charter.

*For support/non-combatives units the five member rule may be waived. For further explanation see the HRS bylaws under Article IV "Unit Recognition".