



**M.E.B.A. VESSEL SPECIFIC PASS-THROUGH
DISPATCH SHEET**

Name: _____

Rating: _____

Vessel: _____

(Dispatched From (*Union Hall*))

(Date Joined)

(Port Where Joined)

Preferred Airport: _____

Address of Record:

(Street Address)

(City, State)

(Zip)

(E-Mail Address)

(Home Phone)

(Cell Phone)

Next of Kin:

(Name: Last, First)

(Relationship)

(Home Address)

(Phone Number)

Personal Information:

(*Ucwwr Upi rg."O ctt kgf."F kxqt egf*)

(Date of Birth)

(SSN - Last 4 #'s)