

Department of Homeland Security  
United States Coast Guard

**D7 ID Card Form**

\*\*\*\*\*EACH ITEM ON THE FORM MUST BE FILLED IN\*\*\*\*\*

STATUS: \_\_\_\_\_  
(Must be either Member, Life Member, Honorary or Commodore)

NAME: \_\_\_\_\_

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

AUXOP: \_\_\_\_\_ (Must be either yes or no)

DOB: \_\_\_\_\_ (YYYYMMDD) Example: 1965OCT30

WEIGHT: \_\_\_\_\_

HEIGHT: \_\_\_\_\_

HAIR COLOR: \_\_\_\_\_

EYE COLOR: \_\_\_\_\_

BLOOD TYPE: \_\_\_\_\_ A+, A-, B+, B-, AB+, AB-, O+, O-, Unknown

Mail with picture to:

Commander (oax)  
Seventh Coast Guard District  
Brickell Plaza Federal Building  
909 SE 1st Av  
Miami FL 33131-3050