

A. V. V. A.
APPLICATION FOR MEMBERSHIP

*If You Did Not Serve In Military Service,
But Would Like To Be A Part Of A Vietnam Veterans Group*

*Associate Membership Is Open To Families, Friends, And Veterans Of Other Periods Of
Service Who Care About The VVA's Goals For \$20/yr. Membership Fee.*

I Wish To Become A Member Of Chapter # : _____ A.V.V.A.

Name : _____

Address : _____

City : _____ *State :* _____ *Zip :* _____

Home Phone () _____ *Work:()* _____ *Cell : ()* _____

E-Mail Address : _____

Date Of Birth : _____ *Sex :* _____

Type Of Membership

_____ *Associate Member – 1 Year : \$20*

_____ *Associate Member – 3 Years : \$50*

Payment Method :

Check : _____ Money Order : _____ Credit Card : _____ Visa _____ Master Card _____

Credit Card Number : _____

Exp. Date : _____

Signature : _____

***Return Your Completed Application With Payment,
Addressed To :***

***A.V.V.A. Membership
Vietnam Veterans Of America Chapter 649
P.O. Box 426
Batavia, Ohio 45103***