

# Application for Membership

## SONS of AMVETS

Squad No. _____	City _____	State _____	Date of Birth _____
Name _____		Date _____	
Street Address _____		Phone _____	
City _____	State _____	Zip Code _____	
E-Mail Address _____			
Name of AMVET Relative _____			Post _____
Relationship:	Father _____	Son _____	Grandson _____
Step-Son _____	Adopted Son _____	Husband _____	Brother _____
Signature of Sponsor (Relative): _____			
_____ (Verified by AMVET Post Adjutant or Membership Chairman)		_____ Signature of Applicant	

Accepted:

\_\_\_\_\_  
Squadron 1<sup>st</sup> Vice Commander

RETAIN THIS CARD FOR SQUADRON RECORD

Squad No. _____	City _____	State _____	
Received From _____			
Address _____			
The sum of _____		For annual dues for year _____	