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 1st Vice Commander

RETAIN THIS CARD FOR SQUADRON RECORD

Revised 8/2011

Squad No. ____ City _____ State ____

Received from _____

Address _____

The Sum Of $ _____ For annual dues

for year _____