



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 Revised 8/2011
 RETAIN THIS CARD FOR SQUADRON RECORD

Squad No. _____ City _____ State _____
 Received from _____
 Address _____
 The Sum Of \$ _____ For annual dues
 for year _____



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