



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)

RETAIN THIS CARD FOR
SQUADRON RECORD

Accepted: _____
Squadron 1st Vice Commander

Revised 8/2011

Squad No. _____ City _____ State _____

Received from _____

Address _____

The Sum Of \$ _____ For annual dues
for year _____