



Application for Membership SONS of AMVETS

Squad No. _____ City _____ State _____ Date of Birth _____
 Name _____ Date _____
 Street Address _____ Phone _____
 City _____ State _____ Zip Code _____
 Name of AMVET Relative _____ Post _____
 Relationship: _____ Father _____ Son _____ Grandson _____ Step-son
 _____ Adopted Son _____ Husband _____ Brother

Signature of Sponsor (Relative): _____
 _____ (Approved by Post) _____ (Signature of Applicant)

Accepted: _____ Squadron 1st Vice Commander Revised 10/2000

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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