

National Association for Black Veterans San Diego Othan Mondy Better Life Chapter 72

## MEMBERSHIP APPLICATION

www.nabvetssandiego.org

**Phone:** 619-832-0017 **Fax:** 866-393-2456 **Email:** omble72@nabvetssandiego.org

Please complete the following information. For prompt processing, please complete all areas. To join online using your credit card, visit www.nabvetssandiego.org Prefix First Name MI Last Name Suffix Address\_\_\_\_\_City\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_ Country\_\_\_\_ Email \_\_\_\_ Home Tel. \_\_\_\_\_ Mobile Tel. \_\_\_\_\_  $\square$ Female  $\square$  Reservist  $\square$  Veteran ( Served 180 days with honorable discharge) **Present Status:**  $\square$  Active Duty ☐ National Guard ☐ Retired ☐ Non-veteran (non-veterans are Associate Members) Branch of Service Service Dates to ☐ Membership renewal ☐ New Member ☐ NABVETS Chapter (if applicable) \_\_\_\_\_ ☐ Community Event ☐ Veterans Administration ☐ Friend ☐ Other\_\_\_\_ Currently employed?  $\square$  Yes  $\square$  No Occupation Company Retired? 

Yes 

No Other memberships (optional) **Membership Type:** (National Fees & Local Chapter Dues) If you are paying by check or money order, \_\_\_\_\_\$40 Annual Membership check here\_\_\_ and make payable to \$70 Two year Membership NABVETS San Diego Chapter 72 \_\_\_\_\_ \$95 Three year Membership Mail payment and completed application to: \$300 Silver Life Membership NABVETS San Diego Chapter 72 \$600 Gold Life Membership P.O. Box 741704 San Diego, CA 92174-1704 \$1,200 Diamond Life Membership You may also send your payment using \$ Chapter Dues (if applicable) Zelle to omblc72@nabvetssandiego.org

I hereby attest that I will abide by the principles and policies for the National Association for Black Veterans, Inc., and to the utmost of my abilities, assist in the promotion of positive lifestyles for veterans, their families, and the entire Community, with a special emphasis on the unmet needs of minority veterans and youth development.

Additional Tax-deductible contribution of \$

Signature: Date:			
	Signature:	Date:	