

2026 Membership Application

Veterans Club of Solivita

The Veterans Club of Solivita Membership is available to Solivita residents who honorably served in any branch of the United States Military or in Allied Forces.

By checking this box you are confirming you are applying for membership to the Veterans Club of Solivita. You will be required to present verification of your veteran status to the Veterans Club Membership Team. Once you complete this form and payment submitted you will be contacted by the Membership Committee or Board Member to complete your membership. *

applying for membership in the Veterans Club of quirements of the club.
ip? *
name, not your nickname): *
Give Feed
1

Address, Street Name *

back

Please Select 🗸
Veteran's Cell Phone Number: *
Please enter a valid phone number.
Veteran's Email: *
example@example.com
Gender: *
\bigcirc M
○ F
Veteran's Date of Birth: *
Month Day Year
Branch of Service *
✓
What Era did you serve during? Check all that apply. *
☐ World War II
☐ Korea
Dominican Republic
☐ Vietnam ☐ Grenada
□ Panama
Peacetime
☐ Gulf War
Somalia
Balkans
☐ Afghanistan
☐ Irag
Other Other
Would you be interested in serving on a committee? Choose any that you are interested and
you will be contacted by a committee member. For more information about the various committees, please visit www.veteransclubofsolivita.com *
Board Position
□ Bricks of Honor

☐ Flags Ove	r Solivita	
☐ Giving Cor	mmittee	
☐ Honor Gua	ard	
☐ Membersh	nip	
Outreach		
□ Scholarsh	ip	
☐ None at th	nis time	
Other Oth	ier	
0 (5		P 113
Spouse / Pa	artner's Name (If Ap	pplicable)
First Name	Last Name	
Spouse / Pa	artner's Email:	
example@exam	nnle com	
examplewexam	ipie.com	
Spouse / Pa	artner's Phone Num	ber
Please enter a v	valid phone number.	
The Vetera	ne Club of Solivita w	vaives membership dues to members who are 82, or those who
		2025. Please choose the appropriate option, below: *
	ate is prior to Decemb	
	ate is January 1st, 19	
O, 2	210 10 0011001 7 104, 12	.,
		Submit