



MEMBER APPLICATION

The **Vietnam War Veterans Association (VWVA)** was formed and organized in response to the needs and issues concerning America's veterans, especially those veterans within our local communities. While not discounting the work being done on behalf of veterans by larger, national veteran organizations, **VWVA** recognized that the plight and needs of veterans closer to home were, in many cases, not being met. It is for that reason that the founding members of this organization, many of whom had over twenty years of experience within the veterans' community, established this organization and incorporated it as a non-profit entity according to the laws of the State of New York.

The goals and objectives of our organization remain simple... to respond to the needs of America's veterans as well as those less fortunate in the neighborhoods where we live. Our programs, as outlined in this pamphlet, assist in responding to those needs.

Membership in **VWVA** is open to veterans of all eras and wars, as well as associates and concerned citizens. We do not profess to be the biggest veteran's organization, but rather an organization where camaraderie and our activities work hand-in-hand in accomplishing our goals.

We appreciate your interest in the **Vietnam War Veterans Association**, and stand ready to answer any questions you might have about us or what we do.

Please complete the application form below by printing this page and entering the information by hand, or by completing the fillable form on the computer. The fillable form can be emailed directly to Commander Bob Kohler by clicking the submit link, or you may print the completed application and bring it to our regular meeting on the 4th Tuesday of the month at the Bellmore Veterans Association, 2400 Bedford Ave, Bellmore, NY 11710.

Questions: Commander Kohler (516) 946-2906 or Bob@vwva.org

Please detach and submit the form below at the meeting. Your initial membership dues may be submitted when you submit the application.

	Vietnam War Veterans Association, Inc. MEMBERSHIP APPLICATION
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LAST NAME _____	FIRST NAME _____	M.I. _____	DATE _____
ADDRESS _____	CITY/VILLAGE _____	STATE _____	ZIP _____
HOME PHONE _____	MOBILE PHONE _____	EMAIL _____	
TYPE OF MEMBERSHIP: <input type="checkbox"/> VETERAN BRANCH OF SERVICE _____		MEMBERSHIP DUES \$20 PER YEAR	
NOTE: A COPY OF YOUR DD-214 IS REQUIRED FOR VETERAN STATUS <input type="checkbox"/> NON-VETERAN (ASSOCIATE MEMBER)			