



MEMBERSHIP APPLICATION

Howard County Vietnam Veterans Inc.
8313 E. 400 S.
Greentown, IN 46936

Phone: (765) 628-0297
Web Site: hcvvo.net
Email: vveterans@aol.com

Name: _____ Date: _____

Address: _____ Phone: _____

State: _____ DOB: _____

Zip Code: _____ Email: _____

Branch of Service: _____ Unit: _____ # of Years: _____

- You have my permission to release my personal information to other Hcvvo members.
- You DO NOT have my permission to release my personal information to anyone.
- I agree to abide by the By-Laws of Howard County Vietnam Veterans

SERVED DURING: (Check all that apply)

- Vietnam (location served in-country) _____ Vietnam Era
- WWII Korea Cold War Peacetime Grenada Somalia
- Bosnia Lebanon Kosovo Desert Storm Desert Storm II
- Afghanistan Enduring Freedom Iraq
- Associate (non-veteran) Other (specify) _____

****Please note that if you are a veteran you must submit a copy of your DD214 with this application for membership unless you have previously submitted a copy**

Please check here if you need a Newsletter mailed to you. Membership: Annual Lifetime

New or Renewal (annual = \$25 Lifetime= \$150)

Received by: _____ Amount: _____ Cash Check

Amount Rec: _____ Date Rec: _____