



Associates of Vietnam Veterans of America, Inc.



Application for Membership

State/Chapter Chapter 937 of Brazos Valley At-Large

VVA Member: Yes No If no, are you eligible for VVA membership? Yes No

New Member: Renewal: Membership #, if known: _____

Name: _____ Sex: F M

Address: _____ Date of Birth: _____

City: _____ ST: _____ Zip: _____

Phone (H): _____ Phone (C): _____

E-Mail: _____

Yearly Membership Dues:

1 Year: \$20 3 Years: \$50

Life Membership Options: (check all that apply)

| | |
|--|---|
| <input type="checkbox"/> Paid in Full | <input type="checkbox"/> 49 yrs and under \$250 |
| <input type="checkbox"/> Payment Plan (Requires a \$50 down payment. \$25/mo until paid in full) | <input type="checkbox"/> 50-55 years \$225 |
| | <input type="checkbox"/> 56-60 years \$200 |
| | <input type="checkbox"/> 61-65 years \$175 |
| | <input type="checkbox"/> 66-71 years \$150 |
| | <input type="checkbox"/> 72 and above \$100 |

**NOTE: Paying less than \$250
requires proof of age.**

DO NOT SEND CASH

| | | | |
|--------------------------------|---|-------------------------------------|--------------------------------------|
| <u>Payment Method</u> | | | |
| <input type="checkbox"/> Check | | | <input type="checkbox"/> Money Order |
| <input type="checkbox"/> Visa | <input type="checkbox"/> American Express | <input type="checkbox"/> Mastercard | <input type="checkbox"/> Discover |
| Card # : _____ | | Exp Date: _____ | |
| Signature: _____ | | | |

Make checks payable to AVVA, and mail to:

Monument Bank / AVVA Lock Box / 8602 Colesville Rd. / Silver Spring, MD 20910