

Print this form and complete it. Present it to a Sons of AMVETS member at Post 51 to process it.



**Application for Membership
RANDOLPH SONS OF AMVETS
9 AMVETS Lane
Randolph, MA 02368**

Eligibility for membership in the Sons of AMVETS shall be limited to all male descendants, grandsons, adopted sons and stepsons, fathers, husbands, widowers, and brothers of members of AMVETS; the deceased members of AMVETS, or the personnel who died and would have been eligible for membership in the parent organization, and are at least eighteen (18) years of age and is not eligible for membership in the parent organization. This is not to include in-laws of any type.

Annual membership is \$30. Life membership is \$300.

Date ____ / ____ / ____

SQDRN No.: ____ City: _____ State: ____ DATE OF BIRTH : ____ / ____ / ____

Name: _____ Date: ____ / ____ / ____

Street Address: _____ Phone: _____

City: _____ State: _____ ZIP Code: _____

EMAIL ADDRESS: _____ @ _____

Name of AMVET Relative: _____ Post: _____

Relationship: Father Son Grandson Step-son Adopted Son
 Husband Brother

Signature of Sponsor (Relative): _____

(Verified by Post Adjutant or Senior Vice Cmdr)

(Signature of Applicant)

Accepted: _____
(Squadron 1st Vice Commander)

RECEIPT

RECEIVED FROM: _____

ADDRESS: _____

DATE: _____ THE SUM OF: \$ _____ FOR ANNUAL: _____ LIFE: _____

CASH: _____ CHECK: _____ CHECK # _____ RECEIVED BY: _____