Beirut Veterans of America Membership Application

NAME:	Date of Birth:
Address:	
Email:	Phone: _()
Unit/Ship in Lebanon:	Dates Served:

Note: Annual Membership runs for one year from date of receipt of application.

MEMBERSHIP CLASS (please mark appropriate category):

REGULAR: (Beirut Veteran): I am a Veteran of the U.S. Armed Forces that served with or directly supported the Multi-National Peacekeeping Forces in or around Beirut, Lebanon, since 1958. I understand I must provide evidence supporting this service with a DD 214 or other Official OQR/SRB records.

	ASSOCIATE: I am NOT a Beirut Veteran, however, I am or have served on
acti	ive duty in the U.S. Armed Forces or was a civilian employed by the U.S. and
ser	ved in or around Beirut, Lebanon, during a qualifying period.

AFFILIATE: I am NOT a Veteran but wish to affiliate with the BVA to support its Mission and the Organization, and agree to do so with honor and integrity.

NEXT OF KIN (NOK): I am the widow, mother, father, child, grandchild or sibling of a U.S. Servicemember that was killed in Beirut. <u>NO DUES REQUIRED.</u> Name of Deceased Servicemember: _____

FAMILY MEMBER (this is **NOT** NOK!): I am the spouse, parent, child, grandchild or sibling of a card-carrying Regular Member of the BVA, or of a person who would be entitled to be such a member (applicant must provide evidence).

RENEWAL: Membership Number ______.

MEMBERSHIP DUES:Annual Membership - \$15.00 (from date of receipt)Life Membership:If aged 57 and up, \$100.00; if 56 and under, \$150.00.I would like to make a donation of \$______ to support the BVA.

Signature of Applicant/Donor: _____

Forward Application and supporting Documentation if necessary to:

BVA, c/o Richard Truman 42 Fife Street Stafford, VA 22554

Email: membership@beirutveterans.org Info: info@beirutveterans.org Website: www.beirutveterans.org