

1. Chapter Name

2. State

3. Last Name

First

Middle

4. Last 4 of SSN

5. Current Address

6. Birthdate

7. City

8. State

9. ZIP Code

10. Home Phone Number

11. Cell Number

12. Email Address

Please Check One

13. Youth

14. Veteran

15. Immediate Family Member of Veteran

16. Aux Member

18. DAV Member

19. Professional _____

20. Other _____

INSTRUCTIONS

NOTE: Complete information is important to ensure your records are updated correctly.

Item 1 Name of the Chapter where you volunteer (if applicable).

Item 2 State where it is located.

Items 3 thru 12 Provide full name, last four digits of social security number, current address, birthdate, your home phone number with area code (if applicable), cell phone number and email address.

Item 13 thru 20 Check the Box indicating your status.