

MEMBERSHIP APPLICATION FOR THE DISABLED AMERICAN VETERANS

Disabled American Veterans Department of Arizona 38 W Dunlap Ave Phoenix, AZ 85021

LIFE MEMBERSHIP AMOUNTS:

80 years and older FREE
 71 – 79 \$140.00
 61 – 70 \$180.00
 41 – 60 \$230.00
 40 and under \$250.00
 \$40.00 down for life membership

Date of Application:				
Age:				
Name:				
	Last Name	First Name	Middle Initial	
Street Address:				
City/Town:	State:	Zip Code:		
Telephone number:			Male	Female
Date of Birth:	Branch of Service:			
Rank:	Date Enlisted:	Date Discharged:		
Percentage of service-connected disability:		%		
Purple Heart:	Yes	No	Ex-POW:	Yes No
Sponsor's Name/Code Number:				
Chapter Name and Number requested (if known):				
Spouse's Name (optional):	Spouse's Date of Birth:			

PAYMENT INFORMATION

(Please make checks/money orders payable to: Disabled American Veterans (DAV))

New Member Full Paid Life Member

Payment/Membership Code Number: _____

AMOUNT: \$ _____ Check Money Order

Credit Card: MasterCard VISA Discover American Express

Card Number:			Expiration Date:	
Signature:			Date:	