

# MONTEREY BAY VETERANS, INC. MEMBERSHIP APPLICATION

Membership Year runs from January 1st to December 31st

NAME: \_\_\_\_\_  
Last First MI

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

I am applying for membership and:

I have honorably served in the Armed Forces of the United States, and will abide by the Doctrines, Principles, By-Laws, and Constitution of this Organization.

I am a wife or widower of a past or present member of the Armed Forces of the United States that will abide by the Doctrines, Principles, By-Laws, and Constitution of this Organization.

I am a citizen of the United States that will abide by the Doctrines, Principles, By-Laws, and Constitution of this Organization.

Type and % of Disability (if any) \_\_\_\_\_ Chair Use: Yes \_\_\_ No \_\_\_

Initial Membership  Renewal  Enclosed is my \$25.00 Membership Dues   
Enclosed is my \$225.00 Life membership

I also wish to donate \$5. \_\_\_ \$10. \_\_\_ \$20. \_\_\_ Other \$ \_\_\_\_\_

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Signature of Applicant

Please Make Check Payable to **Monterey Bay Veterans, Inc.**

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FOR OFFICE USE ONLY

\$ \_\_\_\_\_  
Money Received In Computer Membership Card Mailed

PO Box 481 ~ Monterey, CA. 93942  
[www.mbv.org](http://www.mbv.org)

PH. (831) 901-0217 ~ Fax. (831) 449-0368  
Monterey Bay Veterans, Inc.

mbvinc@pacbell.net