Department of California
Committed to Serve... Those who served

Membership Application

Yes, I want to join AMVETS! I certify that I meet the membership requirements—
I am serving or have honorably served in the U.S. Armed Forces (Active, Guard or Reserve) after September 15, 1940.

Membership Type: ☐ **Annual** ☐ **Life Dues Increased September 1, 2023**
(Based on Age) – Up to Age 55 $500.00, Age 56-65 $400.00, Age 66 or older $300.00

Post you are joining: _____

Name: _____

Address: _____

City: _____

State: _____ **ZIP Code:** _____

Gender: ☐ **Male** ☐ **Female**

E-mail Address: _____

Home Phone: _____

Date of Birth: _____

Branch of Service: _____

Date Entered Service: _____

Date of Discharge: _____

Type of Discharge: _____

Spouse: _____

Sponsor: _____

Signature of Member: _____ **Date:** _____

Post Officer Authorizing Signature: _____ **Date:** _____

☐ **Certify that I have viewed the Veterans DD214 being Honorable Discharged, Honorable Separation, or General Discharge under Honorable Conditions**

AMVETS Department of California
Membership Department
12345 Euclid Street, Garden Grove, VA 92840 Mailing Address: P.O. Box 384, Visalia, CA 93279