



## **AMVETS Post 917 Membership Form**

**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 (\$32.00\*)  Life (\$250.00 \*as of 1/1/2012 )

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: \_\_\_\_\_

Method of Payment:  Check or Money Order Payable to AMVETS Post 917

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*\* A national minimum amount that many vary from state to state or from post to post.*

**Members must be prepared to provide proof of military service.**

Print and Mail to:  
Frank Russo  
AMVETS Post 917  
64 Mulberry Circle  
Staten Island, N.Y. 10314