



Date _____

VIETNAM VETERANS OF AMERICA

Membership Application for DoD-Designated MIA Veteran for Honorary Life Membership

MIA Veteran Name: _____

Date Of Designation: _____ Branch of Service: _____

State/City of Residence Upon DoD-Designation: _____

Sponsorship State Council : _____

Sponsorship Chapter: _____

Contact Address: _____

City: _____ State: _____ Zip: _____

Phone No: _____ E-mail: _____

(Signature of Sponsor)

(Official Title)

Return this application to:

VIETNAM VETERANS OF AMERICA
Attn: Membership
8719 Colesville Road, Suite 100
Silver Spring, MD 20910