

Blackstone Valley Veterans Association

Application for Membership

Name: _____

Address: _____

Town: _____

State: _____ Zip: _____

Tel: _____

Email: _____

All information herewith is covered under the United States Privacy Act of 1974.

I hereby agree to abide by the Blackstone Valley Veterans Association Bylaws. I agree to provide a valid copy of my DD214, showing required military service* with a separation under Honorable Conditions.

I further pledge not to discredit the association or its membership. Misuse or misrepresentation are grounds for suspension or termination of membership.

Applicant's Signature: _____

**M.G.L. ch.4, s.7, clause 43 (Massachusetts General Law Chapter 4, Section 7, Clause 43)*

Dues: \$20.00 per year
(first year free)