



Application for Membership (Please complete a separate application for each individual joining)

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* _____ *State* _____ *ZIP Code* _____ *Country (if not USA)*

Phone: (____) _____ **Alternate Phone:** (____) _____

E-mail Address: _____ **URL** _____
 (To be considered for inclusion on VMFP links page)

Joining As: Veteran Family Member (name of veteran) **Dates of Service:**
 _____ From: ____/____/____ To: ____/____/____

Current Status Discharged/Retired Reserves National Guard Active Duty

Branch of Service:
 Air Force Army Coast Guard Marines National Guard Navy Reserves

Other information
 How did you hear about us? _____
 Are you active in any other veteran organizations? _____
 Would you like to be contacted about serving on a committee or in a leadership role? Yes No

Mission Statement
 VETERANS and MILITARY FAMILIES for PROGRESS is a national organization dedicated to ensuring that the rights and needs of veterans, active-duty service members and their families are:
 - understood by the American public,
 - endorsed by our elected officials, and
 - protected by legislation, regulation, and public policy initiatives

I have read and support the Veterans and Military Families for Progress Mission Statement.

 Signature Date

New member **Renewal**
 Annual \$35 3-Yr \$100

Mail with your check payable to:
Veterans and Military Families for Progress
PO Box 66353
Washington, DC 20035

I would also like to make a donation of \$ _____

For more information call **(202) 841-1687** or email info@vmfp.org