

# Veterans' Assistance League of Recognition (V.A.L.O.R. League) Application for Membership

V.A.L.O.R. League membership is open to any person, 18 years or older, who will support all Veterans' and/or associated organizations and groups.  
Once your application is submitted, it will be voted on at the following monthly meeting.

## Personal Information

*please print*

*Name* \_\_\_\_\_

*first, middle initial, last*

*Address* \_\_\_\_\_

*City* \_\_\_\_\_

*State* \_\_\_\_\_

*zip* \_\_\_\_\_

*Phone* \_\_\_\_\_

*daytime*

*evening*

*Cell #* \_\_\_\_\_

*Email* \_\_\_\_\_

*Date of Birth* \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

*Is a V.A.L.O.R Member Sponsoring You?*

*Yes* \_\_\_\_\_

*No* \_\_\_\_\_

*If Yes Name of Member* \_\_\_\_\_

## V.A.L.O.R. League Requirements

Membership dues are to be paid at the time of the required interview. Membership dues are prorated each quarter. The proration is as follows:

June 1 thru August 31	\$25.00
September 1 thru November 30	\$18.75
December 1 thru February 28 (29)	\$12.50
March 1 thru May 31	\$ 6.25

Please state if you have had any disciplinary actions through a Veterans' or any equivalent organization. Yes \_\_\_\_\_ NO \_\_\_\_\_ (if yes, please attach written explanation with application)

## Signature and date

*Signature* \_\_\_\_\_

*Date* \_\_\_\_\_

*Date Approved* \_\_\_\_\_

*Date Denied* \_\_\_\_\_