

Kentucky Veterans Sams Application

*Instruction: Fill out Form, Print it, and mail it with payment to Chapter Treasurer
Ken Etcheson, 1737 Bogard Lane, Mount Washington, KY 40047.
Initial Dues \$25, yearly dues \$10.*

Primary VET Applicant

Last Name: _____ First Name: _____ Middle Initial ____
Street Address: _____ City _____ State ____ Zip _____
Email: _____
Phone: Home: _____ Work: _____ Cell: _____
Good Sam #: _____ Expiration Date: _____
Branch of Service: _____ Dates of Service: From _____ To _____
Timeframe Served: WWII__ Korea __ Vietnam __ Desert Storm __ Iraq __
Afghanistan __ Other _____

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+Second VET in household ← **Only complete this section if your Spouse is a VET!** +
+ (If Spouse is **Not a Veteran**, skip to Emergency contact section below) +
+Last Name: _____ First Name: _____ Middle Initial ____ +
+Spouse Email: _____ Spouse Cell Ph: _____ +
+Branch of Service: _____ Dates of Service: From _____ To _____ +
+Timeframe Served: WWII__ Korea __ Vietnam __ Desert Storm __ Iraq __ +
+ Afghanistan __ Other _____ +
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In case of Emergency, contact:

Name: _____ Relationship _____
Address (if not yours): _____
Phone: _____ (Important!)

Applicant's Signature Application Date

***** Treasurer Remarks and Comments *****

Initial Dues Paid? Yes ___ No ___ Amount _____
Yearly Dues Paid? Yes ___ No ___ Amount _____
Additional purchases (Vests/Additional Patches, etc;) _____

Total Paid: \$ _____ How (cash/check/e-pay) _____ Date Paid _____
Treasurer Comments: _____
