



**Associates of Vietnam Veterans of America, Inc.**

**REQUEST PETITION TO INCORPORATE A CHAPTER**

**We, as a group of AVVA Regular Members, request to Incorporate as an AVVA Chapter:**

NAME OF REQUESTER: \_\_\_\_\_ MEMBER ID # \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

***Please complete the following information:***

NAME OF THE VVA CHAPTER AFFILIATED TO: \_\_\_\_\_  
CHAPTER # \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Any questions should be directed to the Incorporation Committee Chair, Bobbie Morris:  
[bobby514@comcast.net](mailto:bobby514@comcast.net)

**Mail this form to: Bobbie Morris, Incorporation Chair  
155 Fairlane Drive  
Industry, PA 15052**

**Committee use only:**

Rec'd by: \_\_\_\_\_

Date: \_\_\_\_\_