

**ASSOCIATES OF VIETNAM VETERANS OF AMERICA, INC.**

**Application for Dual Membership**

8719 Colesville Rd • Silver Spring • MD • 20910

www.avva.org



Together then: 1979



Together again: 2022

State/Chapter: \_\_\_\_\_

At-Large?

VVA Membership #, if known: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

---

**DUES**

VVA Dual Membership:

Life Membership: \$50

---

**PAYMENT METHOD**

**DO NOT SEND CASH**

Check     Visa     Master Card     Discover     American Express

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card holder's signature: \_\_\_\_\_

---

Make your check payable to **AVVA**

Remit your application and payment to:

**AVVA | PO Box 49029 | Baltimore, MD 21297-4929**

**«««« Duplicate as needed »»»»**