

**VII CORPS DESERT STORM VETERANS ASSOCIATION  
MEMBERSHIP APPLICATION**

Instructions: Please print out this form and mail it, with payment, to: DSVA, 2425 Wilson Blvd., Arlington, VA 22201. Checks should be made payable to The VII Corps Desert Storm Veterans Association.

Name (Include Rank): \_\_\_\_\_

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

Home Telephone: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Birthdate: \_\_\_\_\_

Membership Category: (Circle One)

Regular Member – \$20 Annually

Lifetime Member – \$400