

KENTUCKY VETERANS HALL OF FAME FOUNDATION MEMBERSHIP APPLICATION
2013-2014

NAME & ADDRESS _____

DATE _____
EMAIL ADDRESS _____
PHONE NUMBER _____

CHECK ALL COMMITTEES THAT YOU MAY BE INTERESTED IN;
1) MEMBERSHIP _____
2) BANQUET _____
3) PHOTOGRAPHY _____
4) SECRETARY *PRO-TEM* _____
5) MISC _____

LIST ALL OTHER 501 (c) 3 NON-PROFIT (MILITARY SUPPORT)
ORGANIZATIONS THAT YOU ARE AFFILIATED WITH;
1) _____
2) _____
3) _____
4) _____

DO YOU PREFER DAY-TIME OR EVENING MEETINGS? _____

ARE YOU A VETERAN? ____YES ____NO

ARE YOU AVAILABLE TO ATTEND AT LEAST ONE REGULAR MEETING
A MONTH? ____YES ____NO

FAMILY MEMBER THAT IS A VETERAN ____YES ____NO

Any and all information you have listed is solely for the purpose of our internal records and will not be shared outside of our group. If you have any comments or questions please contact (until further notice) Lorene -- lorenefriedman@insightbb.com -- or -- Peggy -- sweetp1947@zoomtown.com

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