



Vietnam Veterans of America

Membership Application for Permanently Hospitalized Vietnam War Veterans

Name _____ Male ___ Female ___ Date of Birth _____

Name of Health Care Facility _____

Address _____

City _____ State _____ Zip _____

Phone No. _____

Chapter (Optional) _____ Sponsor (Optional) _____

Eligibility: Permanently hospitalized veterans of the Vietnam War who served on active duty (for other than training purposes) in the Republic of Vietnam between February 28, 1961 and May 7, 1975, or in any duty location between August 5, 1964 and May 7, 1975. Eligible veterans may join Vietnam Veterans of America at no cost.

I certify that the applicant's medical condition requires permanent hospitalization:

(Signature of applicant or care-giver)

800-882-1316 301-585-4000 www.vva.org

Return this application, with a copy of your DD-214, to:
Vietnam Veterans of America
Attn: Membership
8605 Cameron St. Suite 400
Silver Spring, MD 20910-3710