

**SOUTHERN HIGHLANDS VIETNAM VETERANS' PEACEKEEPERS AND PEACEMAKERS ASSOCIATION INC.
MEMBERSHIP APPLICATION Inc.**

WE SERVED AUSTRALIA WITH PRIDE, PURPOSE AND HONOUR

This completed form becomes our Membership Register so please take your time to fill in the requested information. Your application will be presented to the next Committee Meeting for approval.

If you would like more information please visit our website at www.SHVVA.com or phone our Secretary, Norm Austin on 0427 854 141.

APPLICANT

Family Name _____ Given Names _____
Date of Birth _____ Preferred Name _____

Contact Information Address _____ Suburb _____ State _____ P/C _____
Postal _____
Home _____
Phone Home _____ Phone Mobile _____
Email _____

Privacy

If you **DO NOT** want to share your contact details with members, please check this box: ☐

If you would like a copy of our Privacy Policy, please check this box: ☐

MEMBERSHIP INFORMATION

Ordinary membership is for the Southern Highlands Sub-Branch, the NSW Branch of the Association and the Vietnam Veterans Federation and is available to veterans with qualifying war service or direct family members of a qualified veteran.

Wives and family of Veterans are encouraged to join either as an Ordinary Member or as an Associate Member with the rights and privileges of an Ordinary Member except you cannot be an office bearer. Other interested people who in the opinion of the Committee are suitable may become an Associate Member.

The membership fee of \$35.00 is distributed as follows: SHVVPPA - \$17.50; The VVPPAA NSW Branch Inc. - \$5.00; and the Vietnam Veterans Federation - \$12.50 which includes a subscription to the VVPPAA bi-monthly journal. We will arrange your Head Office membership and provide your Membership Card.

If you pay fees directly to the NSW Branch (Granville) or to another Sub-Branch then only our fee of \$17.50 is required.

FEES

Full membership fee	\$35.00 \$.....
Associate member of Southern Highlands VVPPA	\$17.50 \$.....
If you pay fees to the NSW Branch (Granville) or another Sub-Branch	\$17.50 \$.....
Donation	\$.....
Enclosed herewith: cash / cheque / money order	TOTAL \$.....

SIGNATURE **Date** / /

PLEASE COMPLETE THE INFORMATION ON PAGE 2, SIGN THE FORM AND SEND IT TO

The Secretary, SHVVPPA Inc., PO Box 900 MOSS VALE NSW 2577

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APPLICANT'S SERVICE INFORMATION

Theatres of service:

Service Number

Rank

Corps

Unit
Ship

1
2
3
4

From
From
From
From

to
to
to
to

Honours
and Awards

Other
Information:

IF APPROPRIATE PLEASE ENCLOSE A COPY OF YOUR DISCHARGE CERTIFICATE

NEXT OF KIN

Application approved by Committee meeting of : / /

Receipt No. Date / /

VVPPAA Card No.