



AMVETS DEPARTMENT OF FLORIDA
1401 Pelican Lane
North Port, FL 34286
LIFE MEMBERSHIP TRANSMITTAL FORM

1. Complete this Life Membership Transmittal Form and send two copies to AMVETS Department of Florida. Save one copy for your Post's records.
2. Submit a check or money order for dues and identify the purpose, i.e., National and Department portion of Life Membership dues. Life Membership dues are \$250. National receives \$125, the Department and the Post retains \$62.50 each. Life Member conversion is \$215. National receives \$110.00, the Department and Post retain \$52.50.
3. Indicate special mailing instructions in the "Send Card To:" section.

Department of Florida

Date: _____

Post Number: _____

City: _____

Post Name: _____

Membership Status: New Member

Current Member Number (Life Conversion) _____

Date Joined: _____

Member Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____ Mobile Phone: _____

Sex: Male Female Date of Birth: _____

Branch of Service: _____ Type of Discharge: _____

Month and Year Entered: _____ Month & Year Discharged: _____

Name of Spouse: _____

Sponsor: _____

Send Card To: _____

