



John P. McKeon Post AMVETS #146

RENEWAL or NEW ASSOCIATE MEMBER

(Please Circle One)

NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE** _____ **(9 DIGIT)**

TELEPHONE: _____ **DATE OF BIRTH:** _____

EMAIL: _____

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IF THIS IS A NEW ASSOCIATE MEMBER PLEASE INCLUDE:

NAME OF VETERAN SPONSOR: _____

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NEW VETERAN MEMBERS PLEASE INCLUDE:

BRANCH OF SERVICE: _____ **ENTER:** _____ **DISCHARGE:** _____

ATTACH COPY OF DD214

RENEWAL COST \$40. • NEW VETERAN MEMBER NO DUES FIRST YEAR

CHECKS PAYABLE TO:

JOHN P. McKEON POST AMVETS #146

4 Hill Top Street

Dorchester, MA 02124

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(617) 436-2911 • www.themckeonpost.com