

THE PACESETTER  
 DISABLED AMERICAN VETERANS  
 CHAPTER 20  
 4896 KEMPSVILLE GREENS PKWY  
 VIRGINIA BEACH, VA 23462-6463

NON PROFIT ORG.  
 U.S. POSTAGE  
**PAID**  
 NORFOLK, VA  
 PERMIT NO. 291



**Membership Application**

**Life Membership**

Life membership is permanent. Life membership dues are as follows and may be paid in interest-free installments following a minimum \$40 down payment:

Age 40 and under .....\$250      Age 61-70 .....\$180  
 Age 41-60 .....\$230      Age 71-79 .....\$140  
 Age 80 and over .....Free

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Spouse's First Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Male     Female      Birth Date \_\_\_\_\_ Date Enlisted \_\_\_\_\_  
 Branch of Service \_\_\_\_\_ Date Discharged \_\_\_\_\_ Rank \_\_\_\_\_

Campaign/Expedition Medals Awarded \_\_\_\_\_  
 I have a service-connected disability rated at \_\_\_\_\_% (0-100%)  
 Did you receive a Purple Heart?  Yes      Disability Discharge  Yes  
 Ex P.O.W.?  Yes      Military Retired  Yes

\_\_\_\_\_ Date of Application

\_\_\_\_\_ Chapter number and location requested (if known)

\_\_\_\_\_ Sponsor's Name and Code Number if Applicable      Telephone \_\_\_\_\_

\_\_\_\_\_ Email address of applicant

My check is enclosed for: \_\_\_\_\_  Charge my credit card in the amount of: \_\_\_\_\_  
 Master Card     Visa     AE     Discover Card

\_\_\_\_\_ Card Number      \_\_\_\_\_ Expiration Date

\_\_\_\_\_ Signature      \_\_\_\_\_ Telephone

Send to: Membership Department  
 DAV National Headquarters  
 P.O. Box 145550 • Cincinnati, OH 45250-5550  
 www.dav.org      (888) 236-8313

