



KOREAN WAR VETERANS ASSOCIATION
MANASOTA CHAPTER 199, FLORIDA
P O BOX 3067
ONECO, FLORIDA 34264- 3067

I hereby apply for membership in the Manasota Chapter - KWVA Date _____

NAME _____
LAST FIRST INITIAL

ADDRESS _____
CITY ST ZIP CODE

Telephone (Home) _____ (Business) _____

Date of Birth _____ Branch of Service _____

P.O.W.? _____

Decorations/Ribbons _____

Signature _____ Sponsor _____

Unit in Korea _____ Dates of Service _____

DD214 or other evidence of Honorable Discharge _____
(Initials of person sighting same)

Wife's Name (if applicable) _____

Are you a member of KWVA National? _____ Your Number _____

Make your ~~\$15.00~~ check payable to KWVA - Manasota Chapter
15.00

FOR TREASURER'S USE ONLY

Dues Paid _____ for Year _____ Treasurer _____