

OFFICIAL USE ONLY

Do not write above this line



Application for Membership
Veterans of the Battle of the Bulge
PO Box 101418
Arlington, Virginia 22210-4418

OFFICIAL USE ONLY

Do not write above this line

Annual Dues \$15.00 Life Time Membership under 70 \$125.00 Life Time Membership 70 and over \$75.00

New Member Renewal – Member # _____

Name _____ Birth date _____

Address _____ Phone () _____

City _____ State _____ Zip _____

All new members please provide the following information:

Campaign(s) _____

Unit(s) to which assigned during the period December 16th, 1944 thru January 25th, 1945 Division _____

Regiment _____ Battalion _____

Company _____ Other _____

Make check or money order payable to VBOB and mail with this application to the above address

Applicants signature _____