

# Europe Defense Veterans of America Annual/Renewal Membership Application

Europe Defense Veterans of America \* National Headquarters \* 1936 Saranac Ave., Suite 2-149 \* Lake Placid, NY 12946 \* (518) 327-5201

**Active EDVA Members** were stationed/deployed and/or served within US-NATO Cold War European Theater of Operations at any time on or between 02 SEPT 1945-26 DEC 1991

**Associate EDVA Members** were stationed or served within the Continental US actively supporting US Military Armed Forces in the Cold War European Theater of Operations at any time on or between 02 SEPT 1945-26 DEC 1991 (Missile Silo/Air Crew, etc.)

**Supporting EDVA members** were stationed or served within Continental US and/or the European Theater area(s) prior to 02 SEPT 1945 or after 26 DEC 1991

Dues are \$5 per year depending on what you feel you can pay. If a financial burden prevents you from paying a \$5.00 per year minimum, then you pay what you can afford.

**It is EDVA policy that no veteran be denied membership because of financial reasons.**

I wish to apply for: (please check category below)

EDVA Membership,  Associate Membership,  Supporter Membership

I enclose \$5  \$  (other amount) Check or Money Order payable to EDVA

*Instructions: For EDVA administrative purposes. Complete form as fully as possible.*

*Enclose membership fee for appropriate dues payable in US funds made out to "EDVA."*

***Attach photocopy of applicant's US Military DD-214/Separation Paper - - Please Block Social Security Number and other personal Identification Numbers***

*If connection to European Theater service 1945-91 is not on the DD-214/Separation Paper attach a signed statement of such. Mail completed application/payment/attachment(s) to:*

EDVA Membership Director  
Herb "J.R." DeFreese, Jr.  
100 Ute Street  
Morenci, AZ 85540

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Mailing Address/Street/Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ - \_\_\_\_\_

Country: \_\_\_\_\_ Home Phone/Personal Contact Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Personal Contact E-mail address: \_\_\_\_\_

I received an Honorable Discharge and/or Honorable Separation from (check all that apply)

Active Duty  Reserves  National Guard after service in the

US Army  US Navy  US Air Force  US Marine Corps

US Coast Guard  US Merchant Marine. I served in the

North Atlantic  Germany  Africa  Europe

Middle East  Berlin  Mediterranean  Other (Specify) \_\_\_\_\_

\_\_\_\_\_ Yes, I hold the position of a Cold War Veterans Association (CWVA) National Officer.

\_\_\_\_\_ Yes, I would volunteer for a position as an EDVA Board of Directors/Representative.

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Signature: X