



AMVETS Membership Application

Yes, I want to join AMVETS! I certify that I meet the membership requirements—I am serving or have honorably served in the U.S. Armed Forces (Active, Guard or Reserve).

Member Information:

Name: _____

Address: _____

City: _____

State: _____ ZIP Code: _____

Gender: Male Female

E-mail Address: _____

Phone: _____

Date of Birth: _____

Branch of Service: _____

Date Entered Service: _____

Date of Discharge: _____

Type of Discharge: _____

Signature: _____

Membership Options

Member of IL post _____ (Dues are set by the post.)

Member at large (\$30 annually)

Lifetime member

Beginning 9/1/23:

Members 66+ are \$300

Members 56-65 are \$400

Members 55 and younger are \$500.

Members must be prepared to provide proof of military service.

Submit your payment directly to the IL AMVETS Post you are joining, or mail to the address below.

Illinois AMVETS
attn: Membership
2206 South Sixth St.
Springfield, IL 62703