

ALABAMA GOOD SAMS
VETERANS MEMBERSHIP APPLICATION

ANNUAL DUES \$ _____ PER RIG

GOOD SAM'S# _____ EXPIRATION DATE _____

BRANCH OF SERVICE _____ DATES OF SERVICE _____

HONORABLE DISCHARGE YES _____ NO _____ SPECIALTY _____

WWII VET _____ KOREAN VET _____ VIETNAM VET _____ DESERT STORM _____

IRAQ _____ AFGHANISTAN _____ OTHER _____

NAME _____
LAST FIRST SPOUSE

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE #'S:
(HOME) _____ (WORK) _____ (CELL) _____

E MAIL ADDRESS (HIS) _____ (HERS) _____

CAMPING RIG _____

TOW VEHICLE _____

BIRTHDATES (HIS) _____ (HERS) _____ ANNIVERSARY _____

CHILDREN: _____

GRANDCHILDREN: _____

PERSON TO NOTIFY IN CASE OF AN EMERGENCY:

NAME _____ PHONE# _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

ANY KNOWN MEDICAL PROBLEMS OR ALLERGIES THAT A PERSON TRYING TO HELP SHOULD BE AWARE OF: _____

ANY SPECIAL EMERGENCY SKILLS:

CPR _____ FIRST AID _____ OTHER _____ IF YES, WHAT LEVEL _____

SIGNATURE

DATE