## Vietnam Security Police Association Membership Application

1. Please PRINT or TYPE clearly and carefully	Today's Date 4 Aug 09
2. Complete only the information that you want to share wi	ith other VSPA members.
Name DIEGEL JOHN Last First	Middle Initial (Nickname or preferred name)
Address //4 RIVERWALK DRIVE Street (or P.O. Box) City	NOR+h PORT FL 34287 State Zip Code
	Bearwunz & Comensi . NRT Please print e-mail address very clearly!
Occupation <u>REFIRED</u> (Or retired)	Spouse's NameCARLA
Dates of USAF Service: from 4/57 to	<mark>5 / ファ Highest Rank M SGT (だー)</mark> Month/Year
1st Tour/TDV, Vietnam on Thailand: from 5/68 Month/Ye	ear Month/Year Base NHA TRANG (not squadron)
2nd Tour/TDY, Vietnam or Thailand: from/97 Month/Ye	Y to 1975 Base UDORN ear Month/Year (not squadron)
Specialty	
K-9, Safeside, Heavy Weapons, LE, Augn	nentee, etc.
If you were K-9	
Dog's Name Tattoo #	Base Dates
Please use another piece of paper to list other tours,	specialties, dogs, etc. as necessary.
Where did you learn about VSPA? (Mark one, if "other	"please write in)
VSPA Website □Publication □Another SP □Reu	
are not sure about any aspect of your documentation, conta	aty as an AP, SP or Augmentee, to the address below. If you neet Phil Carroll for assistance. When you apply include a use, or the Life Membership fees vary
Mail to:  Phil Carroll  VSPA Membership P.O. Box 8  Questions? Conta E-mail: k9nightfight Phone: 503-975-8	<u> </u>

There's more information at our website: www.vspa.com

Gladstone, OR 97027