Vietnam Security Police Association Membership Application

1. Please PRINT or TYPE clearly and carefully	Today's Date 9-26-09
2. Complete only the information that you want to share	with other VSPA members.
Name Gilinsky Lawrey. Last First	Middle Initial (Nickname or preferred name)
Address 359 Kent Road Street (or P.O. Box) City	Howell NJ 07731 State Zip Code
Best Phone # 732-370-9693 E-n (With area code)	
Occupation D'Salled Veteras (Or retired)	
Dates of USAF Service: from 10 - 67 to Month/Year	5-7/ Highest Rank 94.
	Year Month/Year Base Months, Month (not squadron)
A	/Year Month/Year (not squadron)
Specialty K-9, Safeside, Heavy Weapons, LE, Augmentee, 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 "oth	ner" please write in)
SPA Website Publication Another SP	Reunion □Flyer □
are not sure about any aspect of your documentation, co	I duty as an AP, SP or Augmentee, to the address below. If you ontact Phil Carroll for assistance. When you apply include a ld dues, or the Life Membership fee. Life Membership fees vary
Mail to: Questions? Co	ontact VSPA Membership Chairman Phil Carroll

Phil Carroll

E-mail: k9nightfighter@msn.com

VSPA Membership

Gladstone, OR 97027

Phone: 503-975-8608

P.O. Box 8

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