Vietnam Security Police Association Membership Application

1. Please PRINT or TYPE cle	arly and carefully	Today	's Date //- ZZ-09	
2. Complete only the information that you want to share with other VSPA members.				
Name 6/24550		F	LEE	
Last	First	Middle Initial (Nickname or preferred name)	
Address Street (or P.O.	Homas SA: 1 Box) City	State State	75, MA. 01906 Zip Code	
Best Phone # 78/-55			ComCAST - NET	
(With area cod		Please print e-mail a		
Occupation DIRECTOR	· •	•	· · · · · · · · · · · · · · · · · · ·	
(Or ret	ired)		-	
Dates of USAF Service: from	n 12/64 to	8/68 High	hest Rank <u>Sg+</u>	
1st Tour/TDY, Vietnam or T		17 10 11/68	<i>(</i>)	Œ,
2nd Tour/TDY, Vietnam or Thailand: fromtoBase				
· Anna Antonia	Month/Y	ear Month/Year	(not squadron)	
Specialty Allied Police, Selvairy on Bigse K-9, Safeside, Heavy Weapons, LE, Augmentee, etc.				
K-9, Saleside,	neavy weapons, LE, Augi	mentee, etc.	40.5	
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	s necessary.	
Where did you learn about VSPA? (Mark one, if "other" please write in)				
□VSPA Website □Publicat	ion MAnother SP 🗆 Re	union □Flyer □		
are not sure about any aspect of	Vietnam or Thailand and di fyour documentation, conta tt to VSPA for \$15 annual d	uty as an AP, SP or Augme act Phil Carroll for assistar lues, or the Life Membersh	ntee, to the address below. If you nce. When you apply include a nip fee. Life Membership fees vary	
Mail to: Phil Carroll	Questions? Cont	act VSPA Membership (Chairman Phil Carroll	

Phone: 503-975-8608

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

P.O. Box 8 Gladstone, OR 97027

VSPA Membership