All Vertrain Security Police Association Application/Data Sheet
Please PRINT or TYPE clearly, especially your email address. Complete only the information that you want to share with fellow members. List the names and addresses of SP's that you have kept in contact with and or those that you would like to locate.
Name: METZ LEONARD M ———————————————————————————————————
Last First M.I. Nickname
Address: 3/ MERRICIZ AVE 5te 40 MERRICK NY 11566 Street (or P.O. Box) City State Zip Code
Telephone (631) 689 1440 (516) 378-5600
Home Work (optional) E-Mail A065335 ALLSTATE FAX (516) 378 560 4 PLEASE PRINT VERY CAREFULLY . COM If Applicable
Personal /NSURANCE AGENT 12.25.46 DORANNE Occupation (or Retired) Birth Date Spouse's Name
Dates of U.S.A.F. Service 04 1966 to 02 1970 E4- Set Month / Year Month / Year Highest Rank
1 st Tour in Vietnam/ Thailand 08 68 to 64 69 PHAN RAWS Month / Year Month / Year Base (Not Squadron!)
2 nd Tour or TDY 09/69 to 02/70 PHAN RANG- Month / Year Month / Year Base
SPECIALTY (K-9, Safeside, Heavy Weapons, etc.) SAFESIDE SNIPER
F YOU WERE K-9: Dog's Name Tattoo # Base From Month / Year To Month / Year
Names and addresses of AP's or SP's you've kept in contact with:
Names and available info on AP's or SP's you would like to find:

Please list other tours, specialties, dogs, friends, etc. on the back of this form!

Where did you learn about VSPA? SAFESIDE SITE

VSPA Web Site

Veteran Publications

Another SP

Veteran's Reunion

E-Mail: k9nightfighter@msn.com

Other

IMPORTANT: If you are already a member of VSPA and you receive this form, please <u>fill it out and return</u> so that we can update our records and get you on the mailing list for the "Guardmount" Newsletter. If you are a first time applicant, complete this application and mail it with a <u>COPY of your DD214</u> to the address below. Include a check made out to V.S.P.A. for \$15 annual dues. If you join after July 1st your dues will cover the balance of that year and the following year. Life Memberships are now available, rates, depending on your age, are available upon request or on the VSPA website.

MAIL TO: Phil Carroll P.O. Box 8

Gladstone, OR 97027