Vietnam Security Police Association Membership Application

1. Please PRINT or TYPE clearly and carefully				Today's Date <u>2-18-10</u>		
2. Complet	e only the information that	you want to	o share with o	other VSPA memb	ers.	
Name	Christensen	Paul		Arnold		
	Last	First		Middle Initial	(Nickname or preferred name	ne)
Address_	P. O. Box 822643	Dallas		TX	75382	
	Street (or P.O. Box)		City	State	Zip Code	
Best Phon	ne # 214.827.0110		E-mail			4.4
	(With area code)			Please print e-m	ail address very clearly!	
Occupatio	n <u>Television/Record</u>]	Producer		Spouse	e's Name Donna	
	(Or retired)					
Dates of U					Highest Rank Captain	
	Me	onth/Year	N	Month/Year		
1st Tour/	ΓDY, Vietnam or Thailan				0 Base Tan Son Nh	ut
			Month/Year	Month/Ye	ar (not squadro	on)
2nd Tour/	TDY, Vietnam or Thailan	d: <i>from</i>				
			Month/Year	Month/Ye	ear (not squadro	on)
Specialty_	Security				****	
	K-9, Safeside, Heavy	Weapons,	LE, Augmen	tee, etc.		
If you wer	e K-9			*****		
	Dog's Name	1	Tattoo#	Base	Dates	
Please use	another piece of paper	to list oth	er tours, spe	cialties, dogs, et	c. as necessary.	
Where did	l you learn about VSPA?	(Mark one	if"other" nle	anca remita in l		
	•	`	•	,	¬	
UKI V SPA	Website Publication	□ Anothe	r SP UReu	nion UFlyer L		
Applicant	s! You must complete this a	application	and mail it w	ith a copy of your	DD Form 214 (Certificate of	
Discharge)	showing service in Vietnas	m or Thaila	ınd and duty a	is an AP, SP or Au	gmentee, to the address below. I	
					sistance. When you apply includ pership fee. Life Membership fe	
	age: Age $51-60$, $$160 \sim$					es var
Mail to: Phil Carroll			ns? Contact \ Onightfighter		nip Chairman Phil Carroll	

VSPA Membership

P.O. Box 8

Gladstone, OR 97027

E-mail: k9nightfighter@msn.com

Phone: 503-975-8608

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