Vietnam Security Police Association Membership Application

To	oday's Date 12-12-12
1 Please PRINT OF LYPE Clearly and our	
2. All information that you include will be shared with other VSPA	
Last First	(Nickname or preferred name)
Address 815 St, William Dr. Cahokia. Street (or P.O. Box) City	State Zip Code
Street (or P.O. Box) Best Phone # 618.337.4793 E-mail (With area code)	Please print e-mail address very clearly!
o l'and Police Officer sp	ouse's Name UIGNQ
Occupation Refired To Tice (Or retired) Dates of USAF Service: from 6-65 Month/Year Mon	th/Year
1st Tour/TDY, Vietnam or Thailand: from Month/Year	Month/Year Base 19N JON NOUI
2nd Tour/TDY, Vietnam or Thalland: Jrom	Month/Year Base
	Awards AFOUA
Specialty	Bronze or Silver Star, Purple Heart, etc.
If you were K-9 Dog's Name Tattoo #	Base Dates
Please use another piece of paper to list other tours, sp	ecialties, dogs, etc. if you need to.
Where did you learn about VSPA? (Mark one, if "other	" please write-in)
■VSPA Website □Publication □Another SP □Re	union 🗆 Flyer 🗖
Applicants! You must complete this application and main Discharge) to the address below (see "Instructions" on parapply include a check or money order made out to VSPA Life Membership fees vary with your age: Age 51-60, \$16	ge 2 of this application for more details). When you for \$15 annual dues, or the Life Membership fee.
Questions? Can't find your DD-214? Contact Membersh	
E-Mail: BilllMarshallVSPALM85@gmail.com	Phone: 949-388-5664
Mail this application to: Bill Marshall, 578 Spring E	

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