# S★M★A★R★T
# Application for Membership

## Applicant Information

| LAST name: | First: | Initial: | Spouse/Companion: |
|---|---|---|---|
| Mailing address: | City: | State: | Zip: |
| Home phone: ( ) — | Cell phone: ( ) — | Email address: | |

SMART is a 501(c)(19) Not- for-profit Veterans Organization and required to have the following information on each member

| Branch of service: | Year entered service: | Year service ended: |
|---|---|---|

## Name Badge Info

**Instructions:** On the first line, enter your preferred first & last name. The second line is optional and may contain what you want others to know about you, *e.g.,* city, state or branch of service or chapter names you belong too.

**Note:** A member badge comes with the New Member Packet, and your co-member's badge may be purchased for $7.50.

| Member first & last: | Spouse/Companion first & last: |
|---|---|
| Member second line: | Spouse/Companion second line: |

## Membership Fees

**Member** Who referred you? His/her name: His/her SMART #:

☐ Veteran: Active, retired, or honorably discharged from US Military Service, or as a commissioned officer of NOAA or USPHS; or military service of Canada, NATO/SEATO member nation.

Also check all that apply to the member: ☐ Active/Retired/Reserve/Guard ☐ Honorably Discharged Veteran ☐ NATO/SEATO ☐ Recipient of Medal of Honor ☐ Canadian veteran ☐ NOAA ☐ USPHS

| | |
|---|---|
| Annual dues: $65 (plus one time $15 new member packet) | **$80.00** |

**Spouse/Companion**

☐ With privileges of membership for spouse $30: (Spouse/Companion /Family Member/Widow/Widower)

Also check all that apply to the Spouse: ☐ Widow/Widower of member travels in an RV ☐ Social member - Former SMART member who no longer ☐ Veteran: Must include required 501(c)(19) not-for-profit information below

Branch of Service: Year entered service: Year service ended:

Your Spouse or Companion will want to join with you to have National voting rights, the ability to hold the position of Regional director, and became eligible to win door prize drawings.

| | |
|---|---|
| Spouse/Comp $30 | 30.00 |
| His/her badge $7.50 | 7.50 |
| Total Enclosed | 117.50 |

**"I certify with honor that the information I have provided is true and correct."**

| Applicant signature: | Date: |
|---|---|

Cut here: Retain for your records

**Fees Payable to:** SMART **Mail to:** SMART, 600 University Office Blvd #1A, Pensacola FL 32504
Phone: 800-354-7681 Email: smart@smartrving.org Web: www.smartrving.org

| Application mailed on: | Check #: | Amount: |
|---|---|---|
| My SMART contact: | | From: |
| Contact phone #: ( ) — | Contact email: | |

Approved: 4 APR 2016: Previous versions are obsolete and should be discarded