



# Membership Form

I wish to: (Check one)      Apply for a new membership to Veterans for Unification.  
Renew my membership to Veterans for Unification.

Name: \_\_\_\_\_ Referred by: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ (Home) \_\_\_\_\_ (Work)

(Cell) \_\_\_\_\_

Check one:     Veteran  
                   Associate (non-veteran)

**Membership fee:**

\$20/Year

Membership fee: ..... \$ \_\_\_\_\_

I would also like to make a tax  
deductible donation to VU: .....\$ \_\_\_\_\_

Total enclosed.....\$ \_\_\_\_\_

Please make checks or money order payable to:  
Veterans for Unification

Please mail your completed membership application form and  
payment to:

VETERANS FOR UNIFICATION  
805 LAKE STREET #198  
OAK PARK IL 60301