



APPLICATION FOR MEMBERSHIP

Return by Mail to:

Seawolf Association

C/O Dan Arnes

2082 W. 14050 S.

Bluffdale, Utah 84065-5362

Phone: (801) 253-1002 - Email: dan_arnes@yahoo.com

MEMBERSHIP TYPE

LIFETIME – \$250.00 – Full Privileges
(Life Membership May Be Paid with Five (5)
Consecutive **Quarterly** Payments of \$50.00)

REGULAR – Dues \$25.00 per year, Full
Privileges

ASSOCIATE – Dues \$25.00 per year, NO
Voting Privileges

FAMILY – Dues \$10.00 per year, NO
Voting Privileges

ELIGIBILITY

Must have served with the **SEAWOLVES**,
SEALORDS, or **FASU**, **BINH THUY** to become a
REGULAR or **LIFETIME** member.

ASSOCIATE Members may be any person who was
affiliated with the above listed organizations or who
has an interest in the organization or what it stands
for.

FAMILY Members of those Killed In Action or who
have died since returning from Vietnam are eligible
as long as they wish to be affiliated with the
organization.

Name: _____

Address: _____

City: _____

State: _____ ZIP: _____ - _____

Phone: (____) _____

FAX: (____) _____

Email: _____

-----BACKGROUND INFORMATION-----

Dates in-country: _____

Special Skills: _____

Unit attached to: _____

Willing to Help (Y/N): _____

Detachment(s): _____

If "Yes", how: _____

Rank/Rate in-country: _____

How did you hear of the Association? _____

Present Occupation: _____

Comments on Back

Payment Enclosed (Make Payable to Seawolf Association)

Signature: _____

Date: _____

Membership Coordinator: _____

Member Name: _____

Signature: _____

Date: _____

Check # : _____ Amount: _____

Date Deposited: _____

Copy of completed applications to: President, Treasurer, Wolfram Editor

Revised 6/2010