

South Carolina Association of County Veterans Affairs Officers
Membership Application and Renewal Form

Your work or personal **email** address information is required to fully process your membership application.

Please type or print legibly.

Name: _____ Membership Year: _____

Office Name: _____ Position: _____

Are you a CVSO Affiliate Member Retired CVAO

Employer: _____

Address: _____

City: _____ County: _____

State: _____ Zip: _____ + _____

Work Phone: _____ Fax: _____

Please indicate the appropriate category:

CVAO and Associate : Individual Membership \$35.00 due starting 1 JULY 2017.
Payments recieved after 1 October 2017 are considered delinquent and cannot attend Fall Training per Bi-Laws Article IV section 6.

Retired CVAO: Individual Membership \$35.00 due by 31 July. 2017.

Any Payments not recieved by December 31, 2017 will be removed from the SCACVAO membership rolls.

Save and E-mail Applications and Renewals to:

Email: elundeen@lex-co.com

Mail Checks to:

SCACVAO
c/o Ed Lundeen
605 West Main Street, Suite 101
Lexington, SC 29072