



Scottish-American Military Society Membership Application

(revised 1 January 2020; all others obsolete)

Please fill in ALL blanks applicable to you; print carefully, no abbreviations please. Give inclusive dates of one qualifying period of active or reserve service. If you are currently serving, give the starting date and indicate to 'present'. If you have previously served on active duty, please attach a photocopy of your DD214. If currently serving in the reserve or guard attach copy of current assignment orders. If no DD214, NGB22, or orders are available or you are ROTC cadet, attach any officially published document evidencing that fact



A. SCOTTISH BACKGROUND

I am of Scottish birth (Place): _____ Post Number _____
(if applicable)

Scots or Scotch-Irish descent: my surname is: _____

The name and relationship of my ancestor is: _____

In not of Scots descent, reason(s) for requesting membership: _____

(i.e., marriage to a Scot, Commonwealth military service, etc.)

B. MILITARY SERVICE:

Past or present active duty in the US Armed Forces: From: _____ To: _____

Army Navy Marine Corps Coast Guard Air Force Space Force

Past or present service in the US Reserves, National Guard, Service Academy or college ROTC Cadet:

Service: _____; From _____ To: _____

Past or present in British Commonwealth Forces: _____ From: _____ To: _____

Spouse, widow, widower, or lineal descendants of past or present member of US Armed Forces or ROTC Cadet.

Name, grade and service of qualifying individual: _____

FISCAL YEAR 1 JULY—30 JUNE

Annual dues

Voluntary Contribution

TOTAL (minimum \$35) _____

National Dues covers the cost of printing and mailing our National quarterly magazine, *The Patriot*. Dues also cover the cost of membership certificate, By-Laws, and uniform rules and guidelines. If you join between 1 April and 30 June, you will be credited for up to 15 months. Life membership is available and is a Flat Fee of \$425.00. Purple Heart recipients are entitled to a 50% reduction of the Life Membership fee.

(Date of application) (Printed name) (Signature)

(PRIMARY PHONE and code) (E-mail)

Street or PO Box: _____ Occupation: _____

City, State: _____ Zip, Country: _____

Spouse's Name: _____ Interest or Hobbies: _____

I declare that my statements contained herein are true to the best of my knowledge and that if admitted to membership in SAMS, I will abide by the Society's Charter and By-Laws and those of any SAMS Post I may subsequently join.

SAMS is a tax exempt, non-profit corporation granted under IRS Code Section 501c(19) pertaining to the organization of members of the Armed Forces of the United States and incorporated in North Carolina (EIN 56-1356844).

Make checks payable to SAMS and mail with supporting documents to:

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