USWDA Membership Application

Yes! Sign me up as a Member of the United States War Dogs Association, Inc.

Date: ________________

Name: ________________________________

Address: ________________________________

City/State: ___________________________ Zip Code: __________

Phone No: ___________________________ Cell: No: ______________

Email: ______________________________ Fax No: ________________

Service Branch/Unit: ___________________________

Where: ___________________________ When: ________________

Dog Name: ___________________________ Dog No.: ____________

Dates: Served: _______________________

Check one (Payment enclosed)

<table>
<thead>
<tr>
<th>Payment Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Duty</td>
<td>($20.00)</td>
</tr>
<tr>
<td>Veteran</td>
<td>($30.00)</td>
</tr>
<tr>
<td>Supporting</td>
<td>($30.00)</td>
</tr>
<tr>
<td>Life</td>
<td>($250.00)</td>
</tr>
</tbody>
</table>

Additional Donation $ ________________ for U. S. War Dogs.

Print form and send to:

United States War Dogs Association, Inc
1313 Mt. Holly Road
Burlington, New Jersey 08016

Phone No. 609-747-9340 - Cell: 609-234-4539 - Fax No. 609-747-9340
email: ronaiello@uswardogs.org

AKE Payment to: U. S. War Dogs Association, Inc.