

# Official Membership Application Form

The Korean War Veterans Association, Inc.

PO Box 407, Charleston, IL 61920-0407 (Telephone: 217-345-4414)

**DO NOT WRITE IN THIS SPACE** Assigned Membership Number: \_\_\_\_\_

KWVA Regular Annual Dues - \$25.00 | Associate Membership - \$25.00 | MOH, Ex-POW, Gold Star Parent or Spouse & Honorary - \$0.00  
Regular Life Membership: (May be paid in lump sum or 6 equal payments by check over a 12 month period.)

Ages 35 and Under: \$600

Ages 36 - 50: \$450

Ages 51 - 65: \$300

Ages 66 - 79: \$150

Ages 80 & up: \$75

Please Check One:  New Member  Renewal Member # \_\_\_\_\_

Please Check One:	<input type="checkbox"/> Regular Member ( <input type="checkbox"/> KATUSA?)	<input type="checkbox"/> Regular Life Member ( <input type="checkbox"/> KATUSA?)	<input type="checkbox"/> Associate Member	<input type="checkbox"/> Medal Of Honor
<input type="checkbox"/> Ex-POW			<input type="checkbox"/> Gold Star Spouse/Parent	

(Please Print)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Apartment or Unit #(if any) \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Year of Birth \_\_\_\_\_

Email \_\_\_\_\_

Chapter Number/Name (if applicable) # \_\_\_\_\_

## **-All applicants for Regular Membership please provide the following information-**

### Unit(s) to which Assigned

Division \_\_\_\_\_

Regiment \_\_\_\_\_

Battalion \_\_\_\_\_

Company \_\_\_\_\_

Other \_\_\_\_\_

### Service Branch

Army

Air Force

Navy

Marines

Coast Guard

### Dates of service:

**WithIN** Korea were: (See criteria below)

From: \_\_\_\_\_ To: \_\_\_\_\_

**Without** Korea were: (See criteria below)

From: \_\_\_\_\_ To: \_\_\_\_\_

**How did you hear about the KWVA?**  KWVA member,  Internet,  Google,  KWVA Website,  Facebook,  Email,  Magazine,  Newspaper,  YouTube,  Twitter,  Other: \_\_\_\_\_

**"I certify, under penalty of law, that the above information provided by me is true and correct."**  
[If you are applying for membership in a category other than Section 1, par A.1., of the "Criteria for Membership" listed below, complete the "Certification of Eligibility for KWVA Membership" Form on page 2.]

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Make checks payable to: KWVA - Mail to: KWVA Membership Office - PO Box 407 - Charleston, IL 61920-0407.

(Or you may pay by Credit Card)

Credit Card # \_\_\_\_\_  VISA  MASTER CARD  Discover  AMEX

Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_ V-Code \_\_\_\_\_ Signature \_\_\_\_\_

**CERTIFICATION OF ELIGIBILITY FOR KWVA MEMBERSHIP**

In addition to completing the KWVA Membership Application Form on page 1 above, persons applying for, and qualifying for, membership under one of the categories listed below, are also required to fill in the appropriate blanks, sign in the space provided below and attach this page to the completed Membership Application Form on page 1.

**Check Only  
One Category**

- KATUSA:** I served in the Korean War as a member of the Korean Augmentation to the United States Army Forces. I have since relocated to the United States and became a United States Citizen on: Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_\_. (Verification will be required)
  
- Medal of Honor:** I am a Medal of Honor recipient and the date on which it was awarded was: Month \_\_\_\_ Day \_\_\_\_ Year\_\_\_\_\_.
  
- Ex-POW:** I was held as a Prisoner of War by the North Koreans, Chinese, or Russian forces at some time during the period June 25, 1950 to the present, From: Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_ To: Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_.
  
- Gold Star Parent:** I am the parent of: Name [print] \_\_\_\_\_, who was ( ) killed in action, ( ) missing in action or ( ) died as a Prisoner of War during the Korean War on: Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_\_.
  
- Gold Star Spouse:** I am the spouse of: Name [print] \_\_\_\_\_, who was ( ) killed in action, ( ) missing in action or ( ) died as a Prisoner of War during the Korean War on: Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_\_.
  
- Associate:** I have a legitimate interest in the affairs of the Korean War Veterans Association and agree to accept the terms and conditions set forth in its charter and bylaws. I do not qualify to be a Regular member.

"I certify, under penalty of law, that the above information provided by me for the purposes indicated is true and correct."

Applicant Signature: \_\_\_\_\_ Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_

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**Check HERE If  
GIFT Membership**

- GIFT Membership:** I certify, under penalty of law, that to the best of my knowledge, ALL of the information I have provided about the Applicant is true and correct. I have included the required payment with this application.

Signature: \_\_\_\_\_ Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_

Relationship to Applicant: \_\_\_\_\_

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## **CRITERIA FOR MEMBERSHIP IN THE KOREAN WAR VETERANS ASSOCIATION, INC.**

**Section 1. Qualifications of Members.** Membership in this Association shall consist of Regular, Associate and Honorary Members. No person shall be excluded from membership because of race, color, creed, sex, national or ethnic origin, or physical or mental disability, as long as the individual meets the criteria of service requirements as stipulated below. Only Regular Members as defined in A. below have a vote in National or Department matters.

### **A. Regular Members.**

1. **Service in the United States Armed Forces.** Any person who has seen honorable service in any of the Armed Forces of the United States, defined as Army, Navy, Marines, Air Force and Coast Guard, is eligible for membership if:
  - a. Said service was within Korea including territorial waters and airspace at any time, September 3, 1945 to Present, or
  - b. Said service was outside of Korea, June 25, 1950 to January 31, 1955, or
  - c. Said service was as a member of the Korean Augmentation to the United States Army (KATUSA) any time September 3, 1945 to Present, who has relocated to and become a citizen of the United States of America.
2. **Medal of Honor.** Any person qualifying to be a Regular Member, who is a Medal of Honor recipient, is eligible for free life membership. A signed statement of their eligibility for membership must be provided for approval.
3. **Prisoner of War.** Any person qualifying to be a Regular Member and was held as a prisoner of war by the North Koreans, Chinese, or Russian forces during and after the period of hostilities from June 25, 1950 forward, is eligible for free life membership. A signed statement of their eligibility for membership [Application Form page 2] must be provided for approval.

### **B. Associate Members.**

1. Must not be eligible for Regular membership.
2. Any person with a legitimate interest in the affairs of this Association and who wishes to support its aims, and not being eligible for Regular Membership; and who agrees to accept the terms and conditions set forth in the KWVA Charter and its Bylaws and Standard Procedure Manual, shall be eligible for Associate Membership in the Association. A signed statement of their eligibility for membership [Application Form page 2] must be provided for approval.

**C. Gold Star Parents.** Any person whose son/daughter was killed in action, or was missing in action, or died as a prisoner of war while serving within Korea including territorial waters around and airspace above during the Korean War (June 25, 1950 to the present) is eligible for free life membership. A signed statement of their eligibility for membership must be provided for approval.

**D. Gold Star Spouses.** Any person whose spouse was killed in action, or was missing in action, or died as a prisoner of war while serving within Korea including territorial waters around and airspace above during the Korean War (June 25, 1950 to the present) is eligible for free life membership. A signed statement of their eligibility for membership must be provided for approval.

**E. Honorary Members.** Any person of good character may be elected as Honorary Member by vote by the KWVA NATIONAL Board of Directors.

**F. Ineligible.** Any person who has been separated from the service of the Armed Forces of the United States under conditions other than honorable shall be ineligible for membership in this Association.

WEB SITE: [www.kwva.us](http://www.kwva.us)