



Livingston Parish Veterans Association Application

P.O. Box 409 Watson, LA 70786

Date: _____
Applicant Name: _____
Address: _____ City: _____
_____ Zip Code: _____
Phone # Home: _____ Cell: _____ Date of Birth: _____
Sex: M F Current Email Address: _____

*Military Service Dates: _____ Branch: _____

**You do not have to be a Veteran or have served in any branch of the service to be a part of our organization*

Please give a brief explanation of why you wish to join our organization:

Please list any special skills you have acquired:

Please list any groups/committees you currently reside on:

Please indicate committees you would like to serve with:

- Ceremony
- Entertainment
- Food
- Fundraising
- Media
- Parade
- Political

By signing this application you agree to adhere to all the rules set forth by our By-Laws adopted for the Livingston Parish Veterans Association. All information listed on the above application is confidential and is intended for the use of the Livingston Parish Veterans Parade Board Executive Board only. Applicant

Signature: _____ Date: _____

For Office Use Only

Member Associate Member Honorary Member

Date placed in Association: _____

Chairman's signature: _____

Date: _____