



# USSVI APPLICATION FOR MEMBERSHIP & TRIESTE BASE OF USSVI



OUR CREED: "To perpetuate the memory of our shipmates who gave their lives in the pursuit of their duties while serving their country. That their dedication, deeds and supreme sacrifice be a constant source of motivation toward greater accomplishments. Pledge loyalty and patriotism to the United States of America and it's Constitution."

I subscribe to the Creed of the United States Submarine Veterans, Inc., and agree to abide by the Constitution, all Bylaws, Regulations and Procedures governing the U.S. Submarine Veterans, Inc., so long as they do not conflict with my military or civil obligations. I will furnish further proof of my eligibility for Regular or Life membership, including an Honorable Discharge and U.S. Navy (SS) Designation, if required by proper authority.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**National dues (circle level/amount):**  
ANNUAL: 1st Year JAN-SEP \$20, OCT-DEC + 1 yr \$25  
3 Years \$55, 5 Years \$90  
LIFE: Age 76+ \$100, 66-75 \$200, 56 to 65 \$300,  
46 to 55 \$400, under 46 \$500  
NATIONAL MEMBERSHIP DUES ARE MANDATORY

**Trieste Base dues (circle level/amount):**  
ANNUAL: \$20 (1st year) - \$10 (renewal)  
LIFE: Age 76+ \$20, 66-75 \$40, 56-65 \$60,  
46-55 \$80, under 46 \$100

**Associate dues (circle level/amount):**  
ANNUAL: \$20  
LIFE: \$50 (Associates also pay National dues)

Name: \_\_\_\_\_ Sponsor: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ - \_\_\_\_\_ Tel: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

For Associate Members Only: Applicant is (circle one): Veteran Spouse of Veteran Other (specify) \_\_\_\_\_

### BIOGRAPHICAL DATA (New Members/Updates/Changes)

Please provide the information requested below. This information will be retained in the National and/or Base database.

Date Of Birth (MM/DD/YY) - \_\_\_\_/\_\_\_\_/\_\_\_\_ Highest Rank/Rate: \_\_\_\_\_ Retired: Y / N Active Duty: Y / N

Qual Boat: \_\_\_\_\_ Hull #: \_\_\_\_\_ Qual Year: \_\_\_\_\_ From (MM/YY): \_\_\_\_\_ To (MM/YY) \_\_\_\_\_

Other Boats and/or duty stations:	Hull #	From (MM/YY)	To (MM/YY)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Continue on back if necessary)

Spouse or other Next of Kin: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(Applicants on active duty: please provide a permanent address for contact)

#### MAKE CHECK PAYABLE TO 'TRIESTE BASE OF USSVI'

Upon completion deliver to any Base Officer at next meeting, or mail to:  
Robert Cox, Treasurer, 24685 Leafwood Drive, Murrieta, CA 92562

MEETINGS: 3<sup>rd</sup> Sunday of each month at 1515  
Base website: [www.triestebase.org](http://www.triestebase.org)