Arkansas Division Life Membership Form

As a member of the Arkansas Division Sons of Confederate Veterans we are required to pay yearly dues to the Arkansas Division. A Life Membership for the Arkansas Division will cover your yearly state dues for a life time! For \$100 your dues will be covered for life, when it comes to yearly state dues. Protecting you from a dues increase if one ever is needed. The fee will be a flat fee of \$100 and each member will receive a life time membership card. This form is to be brought to GEC meetings to be completed by the current Division Adjutant. If you can not attend the GEC meetings please send the form and check made to the Arkansas Division SCV with your camp commander or adjutant.

Application Form:

[Arkansas Division Sons of Confederate Veterans Life Membership Application]

Personal Information:

- Full Name:
- Address:
- City, State, ZIP:
- Phone Number:
- Email Address:

SCV Membership Information:

- Current SCV Membership Number:
- Current SCV Camp Name and Number:

Acknowledgment:

• I hereby apply for Life Membership in the Arkansas Division of the Sons of Confederate Veterans and agree to abide by the rules and regulations of the SCV.

Applying Member Signature:_____

• Date:

Arkansas Division SCV Life Membership Coordinator: Division Adjutant

Contact Name: Phone Number: Email Address:

Division Adjutant Signature:_____