



**COMBAT VETERANS  
MOTORCYCLE  
ASSOCIATION  
VERMONT CHAPTER 26**  
<http://combatvet.org>  
<http://vt.combatvet.org>  
**VETS FOR VETS**



Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ .ST. \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Road name \_\_\_\_\_

E-mail \_\_\_\_\_

DOB: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Full Membership \_\_\_\_\_ Supporter \_\_\_\_\_ **(Must Be a Veteran)**

Aux. Membership \_\_\_\_\_ **(Must be the Spouse or a Widow of a Combat Vet)**

Sponsor \_\_\_\_\_ **{For Supporters Only}**

Make, Model and Engine Size of Motorcycle \_\_\_\_\_

Service information: (Please check one)

**Army** \_\_\_\_\_ **Navy** \_\_\_\_\_ **Marine Corps** \_\_\_\_\_ **Air Force** \_\_\_\_\_ **Coast Guard** \_\_\_\_\_

Comments: Use the below space to describe any information you think will help process your application. **Please include a copy of your DD214 with this application.**

---

If you are a Combat Vet having served in the United States Armed Forces and ride a motorcycle as a hobby you could be eligible for membership in the CVMA. The annual full membership dues are \$15.00, support and auxiliary \$10.00.

If you have read **Protocal 101** and our **by-laws** and can abide by these rules then sign and date the bottom of the application and make payment to CVMA, along with this application and a copy of your DD-214 and mail to:

**Bruce Bennett**  
**CVMA VT. ST. Rep..**  
**487 Colonial Drive**  
**White River Junction Vt. 05001**

**Phone 802-295-4922**  
**Email bsben0827@aol.com**

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

