

# Application for Membership

## Ladies Auxiliary Military Order of the Purple Heart

Mothers, wives, widows, sisters, daughters, granddaughters, adopted daughters, and direct lineal female descendants regardless of age or date of birth.

Such membership is subject to conditions set forth in Article 1 of the bylaws of the LAMOPH. Life and Associate Memberships are available. Contact the National Secretary.

Membership of the Patriot must be verified through certified evidence of the Purple Heart Award.

Dues include subscription to the Purple Heart Magazine.

# Dues Schedule

## Ladies Auxiliary Military Order of the Purple Heart

Life Memberships	\$50.00
Associate Life Membership	\$50.00



**Fees submitted with Application for Membership are NON-REFUNDABLE.**

*Payment for dues is not deductible as a charitable contribution according to the Internal Revenue Code.*

### PLEASE PRINT ALL INFORMATION

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

I am the \_\_\_\_\_ of (Medal Holder's Name) \_\_\_\_\_

who was awarded the Purple Heart Medal by the U.S. Government.

He/she is  is not  an Active Member of MOPH Chapter # \_\_\_\_\_

Membership must be certified\* by CHAP. ADJ or Copy of Award must accompany this application.

Check one:  
 Life  
 Associate

Applicant's Signature \_\_\_\_\_

Sponsor \_\_\_\_\_

\*Certified by \_\_\_\_\_

Witnessed by \_\_\_\_\_

Date \_\_\_\_\_ Unit # \_\_\_\_\_ Birthdate \_\_\_\_\_

\*Must be signed by the Chapter or Department Adjutant to certify that the Patriot listed above is/was eligible for membership in the MOPH.

Complete and mail to: Tara Waugh, 190 E. Olmstead Dr. C-12, Titusville, FL 32780  
Email: tara@purpleheartmi.com

### FOR INTERNAL USE ONLY—DO NOT WRITE IN THESE SPACES.

Date Received \_\_\_\_\_

Type Member \_\_\_\_\_

Certification by \_\_\_\_\_

Amount Paid \_\_\_\_\_

Member # \_\_\_\_\_