



NATIONAL ASSOCIATION OF STATE WOMEN VETERANS COORDINATORS, INC. (NASWVC)



Membership Application and Renewal

Please provide your address information EXACTLY as it must appear on your incoming mail.

NATIONAL ASSOCIATION OF STATE WOMEN VETERAN COORDINATORS

Today's Date: _____

Name: _____
First Middle Initial Last

VALERIE CONLEY
President

Office Name: _____ Position: _____

PAMELA J.B. LUCE
First Vice

Address: _____

BARBARA WARD
Second Vice

City: _____ County: _____ State: _____ Zip Code: _____

LARRI GERSON
Secretary

Work Phone: _____ Fax: _____ E-Mail: _____

GINA STAMPER
Treasurer

State or Office Website: _____

PRECILLA LANDRY WILKEWITZ
Senior Advisor

Military Branch: _____ Dates of Service: _____ to _____

LYNDA WALDROOP
President Emeritus

Military Branch: _____ Dates of Service: _____ to _____

KAREN ETZLER
Co-Conference Chair

Please indicate the appropriated category:

BERTHA CRUZ HALL
Co-Conference Chair

New Member (SWVC): _____ Renewal: _____

New Associate Member: _____ Renewal: _____

New Vendor: _____ Renewal: _____

State Women Veterans Coordinator Membership (SWVC) – no charge (Current and Past)

State Executive Directors/Commissioners (membership with NASDVA) – no charge (Current and Past)

Annual Associate Individual Membership - \$25.00

Category: VBA ___ VHA ___ Non-Profit ___ VCSO ___ Private ___ Business ___ Citizen ___

Accredited Veterans Service Organization ___ Veterans Organization (Non-Profit) ___

Email Applications to:
NASWVC Secretary
Larri Gerson,
secretary@naswvc.com

Send checks to:
NASWVC
C/O Gina Stamper
PO Box 5241
Boise, ID 83705-5241

Revised 9/1/11