



# Blue Star Mothers of America, Inc.

Organized 1942 – Congressionally Chartered 1960

Associate **APPLICATION** Fiscal Year: \_\_\_\_\_

Join online [www.bluestarmothers.org](http://www.bluestarmothers.org) or email [1vp@bluestarmothers.us](mailto:1vp@bluestarmothers.us) for contact information in your area.

If not online: Associate applications can be:

Submitted directly to the chapter you join.

Or

Mailed to: Blue Star Mothers of America, Inc.  
P.O. Box 880891  
Port St. Lucie, FL 34988

### Fill-in information – Please print legibly

Applicant Name (Required):

Primary Phone No. (Required):	Cell Phone (Optional):	Email Address (Required)
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Address (Required):	City (Required)	State (Required)	Zip (Required)
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### Please check all that apply:

Associate (Associates and Dads do not pay fees)

I am a:  Blue Star Mother  Gold Star Mother  Veteran (I myself served in the Military)  Dad

### Chapter information I wish to join (Required):

Chapter Name:	Chapter State:	Chapter #:
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### Please fill out the following for each military/veteran child. Use reverse side if necessary:

Name	M/F	Branch/Veteran

### Gold Star Mothers Only – Please provide your child's name, branch and years served

Name	M/F	Branch/Years

### Veteran Mothers Who Served Only – Please provide your branch and years served

Name	M/F	Branch/Years

**LOYALTY OATH:** I do solemnly swear that I am not a Communist, Fascist or Terrorist. I do not advocate nor am I a member of any organization that advocates the overthrow of the government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny any person their rights under the Constitution of the United States. I DO further swear that I will not so advocate nor will I become a member of such an organization during the period I am a member of the Blue Star Mothers of America, Inc. I will support and defend the Constitution of the United States against all enemies foreign and domestic; that I will bear true faith and allegiance to the same that I sign this oath freely, without any mental reservation or purpose of evasion, so help me God.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**For Administrative Use Only:**

Post Mark Date:	Received by	Date Received	Paid by: <input type="checkbox"/> Check No. <input type="checkbox"/> Money order No:	Amount \$
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