

# Application For Membership

(Type or Print Clearly in Black Ink Only To Avoid Mistakes)



To the Officers and Members of \_\_\_\_\_  
Camp No. \_\_\_\_\_, Located at \_\_\_\_\_  
State of \_\_\_\_\_.

I, the undersigned, respectfully petition to become a member of the

## Sons of Confederate Veterans

Initial dues are \$35.00 which includes \$5.00 for a recording fee; local and state dues are additional. Go to [www.scv.org/campLocator.php](http://www.scv.org/campLocator.php) to find a local camp. Submit your application directly to the local camp you wish to join or to SCV, P. O. Box 59, Columbia TN 38402-0059 if there is no local camp in your area. Attach a copy of the ancestor's war service record or an approved pension for him or his widow. Also include a simple genealogy family tree linking the applicant to the Confederate soldier. Please see <http://www.scv.org/pdf/SCVLineageChart.pdf>. If accepted, I do hereby promise strict compliance to the Constitution and rules of the organization.

The Confederate patriot through whom I petition for membership, and who adhered to the Cause of the Confederate States of America was my \_\_\_\_\_ whose name was \_\_\_\_\_  
Relationship to Applicant (Print Clearly)

\_\_\_\_\_ Full name of Confederate soldier (Print Clearly)

of \_\_\_\_\_ City/County (Print Clearly) State \_\_\_\_\_

My } Confederate ancestor was a \_\_\_\_\_ in Company \_\_\_\_\_  
Lineal  }  
Collateral  } Rank (Print Clearly)  
(check one) }  
\_\_\_\_\_ Complete name of regiment or unit (Print Clearly)

My Confederate ancestor was paroled , surrendered , released on oath , discharged , killed , or died ,  
(Check one)

on \_\_\_\_\_ Date \_\_\_\_\_ and is buried in \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Name of Cemetery \_\_\_\_\_

\_\_\_\_\_ Clearly Print Full Name

\_\_\_\_\_ Legal Signature

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

( ) ( )  
Date of Birth \_\_\_\_\_ Occupation \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Recommended by

\_\_\_\_\_ Current Member's Name  
(Print)

\_\_\_\_\_ Camp Name & Number

### Report on Application

This application has been examined, and from the information which the camp committee has been able to procure, is approved.

\_\_\_\_\_ Camp Committee on Application

\_\_\_\_\_ Camp Committee on Application

\_\_\_\_\_ Date Approved for Membership by Camp

\_\_\_\_\_ Date Received at GHQ