

# Application For Membership

Type or Print Clearly in Black Ink Only to Avoid Mistakes  
Mail this application and lineage form to:  
SCV Camp 2205 - 3177 Tump Wilkins Rd - Stem NC 27581  
E-mail to: JohnTBullockSCVCamp@gmail.com

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 \$25.00 which includes a \$5.00 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 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. 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 Lineal  Confederate Ancestor was a \_\_\_\_\_ in Company \_\_\_\_\_  
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  
On \_\_\_\_\_ and is buried in \_\_\_\_\_  
DATE County State Name of Cemetery

\_\_\_\_\_ Clearly Print Full Name \_\_\_\_\_ Legal Signature  
\_\_\_\_\_ ADDRESS \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code  
\_\_\_\_\_ Date of Birth MM/DD/YYYY \_\_\_\_\_ Occupation \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ email address

### RECOMMENDED BY

\_\_\_\_\_ Current Member's Name (Print) \_\_\_\_\_ Camp Name and Number

### Report on Application

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

\_\_\_\_\_ SIGNATURE - Camp Committee on Application \_\_\_\_\_ SIGNATURE - Camp Committee on Application  
\_\_\_\_\_ Date approved for Membership by Camp \_\_\_\_\_ Date Received at GHQ