



Membership Application
Student Veteran's Alliance at Western Kentucky University
A Chapter of the Student Veterans of America



Contact Information

(This will help us keep you up to speed on events, meetings, community service opportunities, and membership status)

Last Name: _____ First Name: _____ MI: _____

Phone Number: _____ - _____ - _____ Email: _____

DOB (MM/DD): ____/____/____ Grad Date (MM/YYYY): ____/____/____ WKU ID#: _____

Affiliation

(This is so we can get to know you and keep important stats that will help our organization grow in order to benefit you better)

Please circle ALL that apply:

CAMPUS

WKU MAIN GLASGOW FT KNOX/ELIZABETHTOWN SKYCTC NO WKU AFFILIATION

STATUS

STUDENT STAFF FACULTY ALUMNI SPONSOR SUPPORTER

MILITARY VETERAN

MILITARY

(Even if you are a spouse or dependent, we want to know which family you are from)

ARMY NAVY MARINE CORPS AIR FORCE COAST GUARD NONE

T SHIRT SIZE

SMALL MEDIUM LARGE X-LARGE XX-LARGE XXX-LARGE

WKU SVA lifetime membership is a ONE TIME ONLY PAYMENT OF \$30. This fee allows you access to all of the charity, community, newsletter, exclusive job fair, and veteran/dependent centered events that will help you during your educational journey and everyday life. We are all looking for a place to feel welcome and here, your brothers and sisters are at the ready. Have an Outstanding Day and welcome to the family. By signing below, you agree to the bylaws of the WKU SVA and assure us that all of the information above is correct. This information is for use strictly during SVA related functions.

Signature: _____ Date: ____/____/____

Lifetime Membership Pay Date: ____/____/____