

Vietnam Security Police Association Membership Application

1. Please PRINT or TYPE clearly and carefully

Today's Date 10/27/09

2. Complete only the information that you want to share with other VSPA members.

Name Rosenberg Fred — 'Rosie'
Last First Middle Initial (Nickname or preferred name)

Address 1214 Spring Ave Fort Washington PA 19034
Street (or P.O. Box) City State Zip Code

Best Phone # 215 628 4540 E-mail LOCKMAN76@AOL.COM
(With area code) Please print e-mail address very clearly!

Occupation LOCKSMITH Spouse's Name —
(Or retired)

Dates of USAF Service: from 12/65 to 2/69 Highest Rank S6TE-4
Month/Year Month/Year

1st Tour/TDY, Vietnam or Thailand: from 3 67 to 3 68 Base Phu CAT
Month/Year Month/Year (not squadron)

2nd Tour/TDY, Vietnam or Thailand: from 3/68 to 11/68 Base Phu CAT
Month/Year Month/Year (not squadron)

Specialty Crew Chief MORTARS (COBRA FLIGHT)
K-9, Safeside, Heavy Weapons, LE, Augmentee, etc.

If you were K-9 _____
Dog's Name Tattoo # Base Dates

Please use another piece of paper to list other tours, specialties, dogs, etc. as necessary.

Where did you learn about VSPA? (Mark one, if "other" please write in)

VSPA Website Publication Another SP Reunion Flyer _____

Applicants! You must complete this application and mail it with a copy of your DD Form 214 (Certificate of Discharge) showing service in Vietnam or Thailand and duty as an AP, SP or Augmentee, to the address below. If you are not sure about any aspect of your documentation, contact Phil Carroll for assistance. When you apply include a check or money order made out to VSPA for \$15 annual dues, or the Life Membership fee. Life Membership fees vary with your age: Age 51-60, \$160 ~ 61-70, \$130 ~ 71-80, \$90 ~ 81 or over, \$55.

Mail to:
Phil Carroll
VSPA Membership
P.O. Box 8
Gladstone, OR 97027

Questions? Contact VSPA Membership Chairman Phil Carroll
E-mail: k9nightfighter@msn.com
Phone: 503-975-8608

There's more information at our website: www.vspa.com

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1. Please PRINT or TYPE clearly and carefully.

2. Complete only the information that you want to share with other VSPA members.

Name: Last First Middle Initial (Initial name or preferred name)

Address: Street (or P.O. Box) City State Zip Code

Best Phone # (With area code) Please print e-mail address very clearly!

Occupation (Optional) Spouse's Name

Dates of USAF Service: From Month/Year to Month/Year Highest Rank

1st Tour: TDY, Vietnam or Thailand: years to Month/Year to Month/Year Base (not required)

2nd Tour: TDY, Vietnam or Thailand: years to Month/Year to Month/Year Base (not required)

Specialty K-9, Sideside, Heavy Weapons, I.I. Augmentee, etc.

If you were K-9: Dog's Name Breed Base

Please use another piece of paper to list other tours, specialties, dogs, etc. as necessary.

If you did not serve about VSPA (not one of them), please write in:

Important! You must complete this application and mail it with a copy of your DD Form 134 (Certificate of Discharge) showing service in Vietnam or Thailand and duty as an AF, SP or Augmentee to the address below. If you are not sure about any aspect of your documentation, contact Bill Carroll for assistance. When you apply, include a check or money order made out to VSPA for a \$15 annual dues, or the Life Membership fee if the membership fee was paid with your age: Age 21-60: \$100 - 61-70: \$130 - 71-80: \$200 - 81 or over: \$225.

Mail to: Bill Carroll, VSPA Membership, P.O. Box 8, Gladstone, OR 97037.
 Phone: 503-775-2808, E-mail: bill@vspainfo.com
 Questions? Contact VSPA Membership (Bill Carroll).
 There's more information at our website: www.vspainfo.com