

1. Please PRINT or TYPE clearly and carefully

Today's Date

8/17/2013 *L/M 633*

2. All information that you include will be shared with other VSPA members.

Name SOLESKI BILL C. BILL
Last First Middle Initial (Nickname or preferred name)

Address 121 FAIRWAY DR. BATTLE CREEK, MI 49015
Street (or P.O. Box) City State Zip Code

Best Phone # 269-969-9422 E-mail _____
(With area code) Please print e-mail address very clearly!

Occupation RETIRED Spouse's Name _____
(Or retired)

Dates of USAF Service: from 4/10/68 to 4/7/72 Highest Rank E4
Month/Year Month/Year

1st Tour/TDY, Vietnam or Thailand: from 2/69 to 2/17 Base CAM RANH BAY
Month/Year Month/Year

2nd Tour/TDY, Vietnam or Thailand: from _____ to _____ Base _____
Month/Year Month/Year

Specialty _____ Awards _____
K-9, Safeside, Heavy Weapons, LE, Augmentee, etc. Bronze or Silver Star, Purple Heart, 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. if you need to.

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) to the address below (see "Instructions" on page 2 of this application for more details). 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.

Questions? Can't find your DD-214? Contact Membership Chairman: Bill Marshall

E-Mail: BillMarshallVSPALM85@gmail.com **Phone:** 949-388-5664

Mail this application to: Bill Marshall, 578 Spring Brook East, Westerville, OH 43081