Blue Star Mothers of America, Inc.

Organized 1942 - Congressionally Chartered 1960

www.bluestarmothers.org



* MEMBERSHIP APPLICATION * Transfer Application

Check <u>www.bluestarmothers.org</u> for a chapter in your area or select from the Oklahoma Chapters listed below. Membership applications and dues can be submitted directly on the website under join now if a new member or renewal option is given when you log in. A printed application/renewal can be submitted directly to the chapter you join. Checks should be made out to Blue Star Mothers of America, Inc. Applications can be mailed to the Department of Oklahoma, PO Box 1265, Sand Springs, OK 74063-1265 and we will forward to the Chapter President.

| MEMBERSHIP FEE RENEWS | September 1 EACH YEAR: | Blue Star Mothers \$20 | 0.00; Blue Star Dads | & Associates \$0.00 |
|-----------------------|------------------------|------------------------|----------------------|---------------------|
| I am a new Member: | : | | | |

I am a Transfer Member_____ From Chapter #____, City and State _____

I am a member renewing for year: _____

I am a:
Mother
Step Mother Associate
Dad ~ I am a Gold Star Mother
yes _____no

| OKLAHOMA BLUE STAR MOTHERS OF AMERICA, INC. CHAPTERS | | | | |
|--|--|---|--|--|
| Chapter # 3 ~ Chapter # 5 ~ Chapter # 7 ~ Chapter # 9 ~ Chapter # 11 ~ Chapter # 14 ~ | Broken Arrow Coweta Lake Area (Mannford) Enid Pittsburg County (McAlester) | Chapter # 8 ~ Chapter # 10 ~ Chapter # 12 ~ Chapter # 12 ~ | Sand Springs South Oklahoma City NOKC/Edmond Mounds/Sapulpa MKO Green Country Chisholm Trail (Duncan) | |
| | Tri-County (Owasso) Tall Grass Prairie (Bartlesville) | | Mayes County (Pryor) Rogers County (Claremore) | |

Applicants Full Name:_____

| Address: | | | |
|----------|--------|-------|--------|
| City: | State: | _Zip: | Phone: |

Alternate Phone:_____ E-Mail Address:_____

I do solemnly swear that I am not a Communist or a Fascist. I do not advocate nor am I a member of any organization that advocates the over throw of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny any person their rights under the Constitution of the United States.

I do further swear that I will not so advocate nor will I become a member of such an organization during the period I am a member of the Blue Star Mothers of America, Inc. I will support and defend the Constitution of the United States against all enemies foreign or domestic; that I will bear true faith and allegiance to the same that I sign this oath freely, without any mental reservation or purpose of evasion, so help me God.

 Signed
 Date

 Military Service Member's Name
 M/F
 Relationship to Member
 Service Branch/Veteran

Please provide the APO/FPO address of each Service member listed above if deployed. Your military service member DOES NOT have to be deployed to be eligible for membership.

For Administration Only:

| Date Application was received: | _Check:Cash:Money Order: | | |
|--------------------------------|--------------------------------------|--|--|
| Check/Money Order # | Total Amount Received : \$ | | |
| Received by: | _ Membership Card Given/Mailed: Date | | |
| Date Deposited into Bank | | | |