



Friends of the Alabama Division SCV Application

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Phone Number: _____ Date of Birth: _____

Name and location of sponsoring AL SCV Camp: _____

Name of recommending AL Division member: _____

I would like to receive the Alabama Confederate digitally:

With the signature and support of the Division member above, I would like to apply for membership in the Friends of the Alabama Division SCV. I have enclosed a check in the amount of \$20.00, made payable to the Alabama Division SCV, for an initial membership in the Friends of the Alabama Division SCV for which I will receive a membership certificate, lapel pin and a one-year subscription to the Alabama Confederate magazine which is published four times each year. (Please note that you can elect above to receive the Alabama Confederate digitally which will save postage and printing costs and allow more of your membership dues to go towards the defense of our heritage.) Renewals each year will be \$10.

I promise to always conduct myself in a manner that will reflect positively on the Alabama Division Sons of Confederate Veterans, its members, camps and divisions and especially the Confederate soldiers and sailors whose good names and military service the organization honors by its very existence. Furthermore, I declare that I am not a member of any anti-American or hate group such as the KKK, neo-Nazi or other white supremacy organization, including groups whose objectives are contrary to the mission and purpose of the Alabama Division SCV as described above and in official SCV literature.

Signature of Applicant

Date

Approved By

Date

Mail your application and payment to:

Friends Of The Alabama Division SCV
P.O. Box 375
Capshaw, AL 35742