

Welcome to the Korean War Veterans Association

Chartered by Congress June 30, 2008

***Korean War and Korea Service Veterans...**
A Continuity of Service in the Defense of Freedom



How to Join the Korean War Veterans Association

If you have EVER honorably served in Korea as a member of the U.S. Armed Forces September 3, 1945 to Present, or served outside of Korea June 25, 1950 to Jan. 31, 1955, you qualify to be a Regular Member of the Korean War Veterans Association, Inc.

Membership in the KWVA consists of Regular Members, Associate Members and Honorary Members. No person is excluded from membership because of race, color, creed, sex, national or ethnic origin, or physical or mental disability, so long as the individual meets the service requirements.

The Board of Directors of the Korean War Veterans Association cordially extends you an invitation to join the KWVA if you meet the membership criteria listed below. Joining is easy. Just fill out a membership application and send it, along with the correct dues amount, to:

KWVA Membership Office
PO Box 407
Charleston, IL 61920-0407

Dues are:

- Annual Regular Member: \$25.00
- Annual Associate Member: \$16.00
- Lifetime Regular Member:
 - Ages up to and through 35 years of age: \$600
 - Ages 36 through 50 years of age: \$450
 - Ages 51 through 65 years of age: \$300
 - Ages 66 years of age and older: \$150

Please make checks payable to: The Korean War Veterans Association.

Membership Criteria:

A. Regular Members.

- 1. Service in the United States Armed Forces.** Any person who has seen honorable service in any of the Armed Forces of the United States, defined as Army, Navy, Marines, Air Force and Coast Guard, is eligible for membership if:

- a. Said service was within Korea including territorial waters and airspace at any time, September 3, 1945 to Present, or
- b. Said service was outside of Korea, June 25, 1950 to January 31, 1955.

- 2. Medal of Honor.** Any person qualifying to be a Regular Member, who is a Medal of Honor recipient, is eligible for free life membership. A signed

statement of their eligibility for membership must be provided for approval.

- 3. Prisoner of War.** Any person qualifying to be a Regular Member and was held as a prisoner of war by the North Koreans, Chinese, or Russian forces during and after the period of hostilities from June 25, 1950 forward, is eligible for free life membership. A signed statement of their eligibility for membership must be provided for approval.

B. Associate Members.

- 1.** Must not be eligible for Regular membership.
 - 2.** Any person with a legitimate interest in the affairs of this Association and who wishes to support its aims, and not being eligible for Regular Membership; and who agrees to accept the terms and conditions set forth in the KWVA Charter and its Bylaws and Standard Procedure Manual (hereinafter referred to as SPM), shall be eligible for Associate Membership in the Association. A signed statement of their eligibility for membership must be provided for approval.
- C. Gold Star Parents.** Any person whose son/daughter was killed in action, or was missing in action, or died as a prisoner of war while serving within Korea including territorial waters around and airspace above during the Korean War (June 25, 1950 to the present) is eligible for free life membership. A signed statement of their eligibility for membership must be provided for approval.
- D. Gold Star Spouses.** Any person whose spouse was killed in action, or was missing in action, or died as a prisoner of war while serving within Korea including territorial waters around and airspace above during the Korean War (June 25, 1950 to the present) is eligible for free life membership. A signed statement of their eligibility for membership must be provided for approval.
- E. Honorary Members.** Any person of good character may be elected as Honorary Member by vote by the Board of Directors (hereinafter referred to as the Board).
- F. Ineligible.** Any person who has been separated from the service of the Armed Forces of the United States under conditions other than honorable shall be ineligible for membership in this Association.

NOTE... Give a deserving Korea Veteran a Gift Membership:

If you have a friend or family member that served in Korea and is eligible to be a KWVA member (see criteria above), you can easily give him/her a "Gift Membership"... simply fill out the Application with all the required information for them, then sign it yourself in the designated area as the "gift giver". The new member will receive a membership card, a "Welcome Packet" from the Membership Office, and begin receiving the Graybeards magazine!

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Official Membership Application Form

The Korean War Veterans Association, Inc.
PO Box 407, Charleston, IL 61920-0407 (Telephone: 217-345-4414)

DO NOT WRITE IN THIS SPACE

Assigned Membership Number: _____

KWVA Regular Annual Dues - \$25.00 | Associate Membership - \$16.00 | MOH, Ex-POW, Gold Star Parent or Spouse & Honorary - \$0.00
Regular Life Membership: (May be paid in lump sum or 6 equal payments by check over a 12 month period.)
Ages up to and through 35 years of age: \$600 Ages 36 through 50 years of age: \$450
Ages 51 through 65 years of age: \$300 Ages 66 years of age and older: \$150

Please Check One: ☐ New Member ☐ Renewal Member # _____

Please Check One: ☐ Medal Of Honor ☐ Regular Member ☐ Regular Life Member ☐ Associate Member
☐ Ex-POW ☐ Honorary ☐ Gold Star Spouse ☐ Gold Star Parent

(Please Print)

Last Name: _____ First Name: _____ Middle Initial: _____

Street _____ City _____ State _____ Zip _____

Apartment or Unit #(if any) _____ Phone _____ - _____ - _____ Year of Birth _____

Email _____

Chapter Number/Name (if applicable) # _____

-All applicants for Regular Membership please provide the following information-

Unit(s) to which Assigned

Division _____

Regiment _____

Battalion _____

Company _____

Other _____

Service Branch

☐ Army

☐ Air Force

☐ Navy

☐ Marines

☐ Coast Guard

Dates of service:

WithIN Korea were: (See criteria below)

From: _____ To: _____

WithOUT Korea were: (See criteria below)

From: _____ To: _____

"I certify, under penalty of law, that the above information provided by me is true and correct."
[If you are applying for membership in a category other than Section 1, par A.1., of the "Criteria for Membership" listed below, complete the "Certification of Eligibility for KWVA Membership" Form on page 2.]

Applicant Signature: _____ Date: _____

Note: If this is a GIFT Membership – please sign here to certify, under penalty of law, that to the best of your knowledge, ALL of the information you have provided about the Applicant is true and correct.
[Note: If applicable, you must also complete and sign the Eligibility Form on page 2.]

Signature: _____ Relationship to Applicant: _____

Make checks payable to: KWVA - Mail to: KWVA Membership Office – PO Box 407 – Charleston, IL 61920-0407.

(Or you may pay by Credit Card)

Credit Card # _____ ☐ VISA ☐ MASTER CARD ☐ Discover

Expiration Date ____/____ V-Code_____ Signature_____
