



# Blue Star Mothers of America, Inc.

Organized 1942 – Congressionally Chartered 1960

[www.bluestarmothers.org](http://www.bluestarmothers.org)

2010-2011 application

\* Membership Application \*  
Transfer Application

Check [www.bluestarmothers.org](http://www.bluestarmothers.org) or email [firstvp@bluestarmothers.org](mailto:firstvp@bluestarmothers.org) for contact information for a chapter in your area. Membership applications and dues can be submitted directly to the chapter you join, check made payable to: Blue Star Mothers of America, Inc.

Chapter: Houston Area Chapter (2), P.O. Box 6121, Kingwood, TX 77325

Or they can be mailed to: Blue Star Mothers of America,  
Anne Parker, Financial Secretary, P.O. Box 1023, Longs, South Carolina 29568

Annual Membership Fee: \$20 Note: Associate Members and Dads do not pay fees.

Please check one of the following:

Membership: I am a New Member: \_\_\_\_\_

I am a Transfer Member \_\_\_\_\_ From Chapter #, City and State \_\_\_\_\_

I am a member renewing for year: \_\_\_\_\_

Please check one of the following:

I am a: \_\_\_\_\_ Mother \_\_\_\_\_ Step-Mother \_\_\_\_\_ Grandmother \_\_\_\_\_ Foster-Mother

I am a Gold Star Mother \_\_\_\_\_ yes \_\_\_\_\_ no / Associate \_\_\_\_\_ Blue Star Dad \_\_\_\_\_ Family Member \_\_\_\_\_ Other

Applicants Full Name: \_\_\_\_\_

Address: (city, state & zip), (WE MUST HAVE COMPLETE INFO)

\_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ (REQUIRED)

Home Phone: (REQUIRED) \_\_\_\_\_ cell (optional) \_\_\_\_\_

Please fill out the following for each military/veteran child. Use reverse side if necessary:

Name	M/F	Branch/Veteran	Deployed (Y/N) – Where?

**LOYALTY OATH:** I do solemnly swear that I am not a Communist, Fascist, or Terrorist. I do not advocate nor am I a member of any organization that advocates the overthrow 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.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Administration Only:** Date application received \_\_\_\_\_ Received by: \_\_\_\_\_

Paid: by  check #. \_\_\_\_\_  cash  money order # \_\_\_\_\_ Amount: \_\_\_\_\_

Membership card:  given  mailed Date: \_\_\_\_\_ Date deposited into account: \_\_\_\_\_

Date entered into chapter database: \_\_\_\_\_ Date entered into National database: \_\_\_\_\_