VA U.S. Department of Veterans Affairs	Г	MEMBERSHIP APPLICATION				
VETERANS DAY NATIONAL COMMITTEE						
DEPARTMENT OF VETERANS AFFAIRS OFFICE OF PUBLIC AND INTERGOVERNMENTAL AFFAIRS ATTN: VETERANS DAY COORDINATOR (002D) 810 VERMONT AVENUE, NW WASHINGTON, DC 20420						
		DATE SUBMITTED (MM/DD/YYYY)				
1. ORGANIZATION		2. BUSINESS ADDRESS (Include City, State, and Zip Code)				
3. BUSINESS TELEPHONE NUMBER	4. BUSINESS FAX NUMBER	5. BUSINESS EMAIL ADDRESS				
6. WEB PAGE ADDRESS		7. CURRENT NATIONAL PRESIDING OFFICER				
8. WHAT IS THE MAIN PURPOSE OF YOUR ORGANIZATION						
9. WHY DO YOU WISH TO JOIN THE VETERANS DAY NATIONAL COMMITTEE (VDNC)						
10. WHAT IS THE SIZE OF YOUR MEME	BERSHIP 11. WH	AT PERCENTAGE OF YOUR MEMBERSHIP CONSISTS OF VETERANS %				
12. MEMBERSHIP QUALIFICATIONS						
13. DATE FOUNDED       14. NUMBER OF         (MM/DD/YYYY)       ACTIVE CHA						
17. DO YOU HAVE AN ANNUAL NATION please attach a program from your m ☐ YES ☐ NO		<ul> <li>18. DO YOU PRODUCE ANY PERIODIC PUBLICATIONS (If yes, please include the last three issues with your application)</li> <li>□ YES □ NO</li> </ul>				
19. NAME OF PUBLICATION		20. FREQUENCY OF PUBLICATION 21. DATE OF FIRST ISSUE (MM/DD/YYYY)				

22. IS YOUR ORGANIZATION FEDERALLY CHARTERED AND/OR RECOGNIZED OR APPROVED BY THE SECRETARY OF VETERANS AFFAIRS FOR PURPOSES OF PREPARATION, PRESENTATION, AND PROSECUTION OF CLAIMS UNDER LAWS ADMINISTERED BY THE DEPARTMENT OF VETERANS AFFAIRS, AS PROVIDED IN SECTION 5902 (FORMERLY SECTION 3402) OF TITLE 38, UNITED STATES CODE (U.S.C.) AND SUBSECTION 14.628 (a) AND (c) OF TITLE 38, CODE OF FEDERAL REGULATIONS (C.F.R.) YES NO						
IF YES, WHAT IS YOUR CHARTER'S PUBLIC LAW NUMBER	ON WHAT DATE WERE YO CHARTERED BY CONGRES					
23. IS YOUR ORGANIZATION CLASSIFIED BY THE INTERNAL REVENUE S (If yes, please include evidence of non-profit status, e.g., letter of determination)		YES	NO 🗌			
24. IF ACCEPTED AS A MEMBER/MEMBER, WILL YOUR ORGANIZATION H DAY NATIONAL COMMITTEE MEMBER/MEMBER ORGANIZATION RESPON DESCRIBED IN THE COMMITTEE'S BY-LAWS	ISIBILITIES AS	YES	NO 🗌			
25. DO YOU HAVE A REPRESENTATIVE WHO WILL ATTEND COMMITTEE WASHINGTON, DC	MEETINGS IN	YES	NO 🗌			
APPLICANTS SHOULD SUBMIT SUPPORTING DOCUMENTATION TO ENABLE THE COMMITTEE TO MAKE AN INFORMED DECISION						
SIGNATURE (Ink signature)						
TITLE		DAT	=			
PLEASE SEND THIS APPLICATI	ON VIA EMAIL: ve	etsdav@va.gov	v			
SUSPENSE FOR APPLICATIONS IS JUNE 2 OF EVERY YEAR						
SUSTENSE FOR ATTEICATION						
RESPONDENT BURDEN: VA may not conduct or sponsor, and the unless it displays a valid OMB Control Number. Public reporting burg minutes per response, including the time for reviewing instructions, se needed, and completing and reviewing the collection of information. I aspect of this collection of information, call 1-877-222-8387 for maili	len for this collection of in earching existing data source f you have comments rega	formation is estir ces, gathering and rding this burden	nated to average 20 I maintaining the data estimate or any other			