



# Application for Life Membership

## Military Order of the Purple Heart

**Purple Heart Recipient** Evidence of the award of the Purple Heart must be submitted with the application. Certificate alone does not constitute proof of award. If discharged, discharge document such as a DD214 must be provided reflecting character of service as honorable or under honorable conditions.

**Associate Member** For a parent, spouse, sibling, lineal or adopted descendant of either a living or deceased Purple Heart recipient, evidence of the award of the Purple Heart and the relationship must be submitted with the application. However, if the Purple Heart Recipient is an active member of MOPH, he/she can sign the application certifying to the relationship.

## Dues Schedule

### Military Order of the Purple Heart

Life Membership	\$50.00
Life Membership Installment Plan with application, within 24 months of Application Date	\$25 \$25
Associate Life Membership	\$50.00
Associate Life Membership Installment Plan with application, within 24 months of Application Date	\$25 \$25

Be advised that on request any knowingly fraudulent document sent by you will be released to the Federal Bureau of Investigation (FBI) that may result in prosecution and/or fine/imprisonment.

PLEASE PRINT ALL INFORMATION

Member# \_\_\_\_\_ Chapter# \_\_\_\_\_

Applicant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone(H) \_\_\_\_\_ (Work/Cell) \_\_\_\_\_ FAX \_\_\_\_\_ Email \_\_\_\_\_

Recruited by (Print Name) \_\_\_\_\_

Check one  Life Member  Life Member Installment Plan  
 Associate Life Member  Associate Life Member Installment Plan

Credit Card  VISA  Mastercard  Discover  American Express

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Applicant Signature \_\_\_\_\_  
(required even if not paying by credit card) *Typing my name above will constitute as my signature*

**See left side for Dues schedule.**

MOPH use only

All applicants must complete the appropriate section below and send with payment to: MOPH National Headquarters  
5413-B Backlick Road, Springfield, VA 22151 www.purpleheart.org 888.668.1656

**Purple Heart Recipient** MOPH Bylaws require that a copy of the document that supports the award of the Purple Heart medal must accompany each application. One of the following documents must be submitted with the application. If discharged, a discharge document such as a DD214 must be provided reflecting character of service as honorable or under honorable conditions. A copy of documentation submitted will be retained on file for future reference. Certificate alone does not constitute proof of the award.

DD214  DD215  WD AGO 53-55  Orders  Letter of Transmittal  Other \_\_\_\_\_

**Service**  Army  Navy  Air Force  Marines  Coast Guard

**War Wounded**  WW2  Korea  Vietnam  OEF  OIF/OND  Other \_\_\_\_\_

Date entered service \_\_\_\_\_ Date Departed Service/Discharged \_\_\_\_\_ Date wounded \_\_\_\_\_

Location of Engagement \_\_\_\_\_ Serial # \_\_\_\_\_ VA Claim # \_\_\_\_\_

**Associate Member** Documentation of relationship and proof of Purple Heart award, if recipient is not a member, required.

Name of Purple Heart Recipient \_\_\_\_\_ Member# \_\_\_\_\_

Chapter# \_\_\_\_\_ MOPH Member's Signature \_\_\_\_\_

*I certify that the person named on this application is my lineal relative  
Typing my name above will constitute as my signature*

**Purple Heart documentation**  DD214  DD215  WD AGO 53-55  Orders  Letter of Transmittal  Other \_\_\_\_\_

Relationship of Applicant to Purple Heart Recipient \_\_\_\_\_

**Relationship documents**  Birth Certificate  Adoption Papers  Marriage Certificate  Other \_\_\_\_\_

The National Adjutant will make the final determination on eligibility. Altered documents constitute automatic denial of membership. Payment for dues is not deductible as a charitable contribution according to the Internal Revenue Code. Dues include subscription to the Purple Heart Magazine.