

Blue Star Mothers of America Inc., 1SC Midlands Chapter

Post Office Box 2364, Lexington SC 29071

Applicant Information					
Full Name:				Date:	
	Last	First	M.I.		
Address:					
	Street Address			Apartment/Unit #	
	City		State	ZIP Code	
Phone:		Email			
		Date of Each Son / Daughter in	the Service		
		Branch of	ine Service		
Hero Name:					
Llava Nama		Branch of			
Hero Name:		Service:			
Birthday:		Stationed:			
Birthday:		Stationed:			
Signature					
Signature:		-	D	ate:	
				<u> </u>	

Blue Star Mothers of America Inc, 1SC Midlands Chapter Membership fees: \$30

Associate Members and Fathers do not need to pay.

Please make checks payable to Blue Star Mothers of America Inc, 1SC Midlands Chapter.