



**Blue Star Mothers of America, Inc.**

Organized 1942 – Congressionally Chartered 1960  
*bluestarmothers.org*

**Canyon Lake Area Blue Star Mothers TX 7**

**PO Box 312312**

**New Braunfels, TX 78131**

*e-mail: [clabsmtx7@gmail.com](mailto:clabsmtx7@gmail.com)*

*Facebook: canyonlakeareabluestarmothers*

**Membership Application: September 1, 2015 – August 31, 2016**

**Annual Membership fee for Mothers: \$30 Pin (Optional) - \$10**

**Please check the following:** \_\_\_\_\_ New Member \_\_\_\_\_ Renewal \_\_\_\_\_ Transfer  
\_\_\_\_\_ *Mother* \_\_\_\_\_ *Dad* \_\_\_\_\_ *Associate* \_\_\_\_\_ *Gold Star Mother*

**Applicant's Full Name:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_

**Home Phone:** ( ) \_\_\_\_\_ **Cell Phone:** ( ) \_\_\_\_\_

**Email:** \_\_\_\_\_

Please fill out the following for each military child/veteran you want to sponsor:

Name	Relationship	M/F	Branch	Active: Y/N	Birthday

*As a Blue Star (Mom, Dad, Associate), I do hereby swear to contribute to the mission of this organization in its support of all of our troops of the United States, its wounded warriors, and veterans; and that I will furthermore support the membership of this chapter and promote patriotism by my words, actions, and deeds.*

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

**Please complete reverse side of application**

**FOR ADMINISTRATION ONLY**

Dues: \_\_\_\_\_ Donation: \_\_\_\_\_ Total: \_\_\_\_\_ Check: \_\_\_\_\_ Cash: \_\_\_\_\_

Entered in BSMA: \_\_\_/\_\_\_/\_\_\_ CLABSM Directory: \_\_\_/\_\_\_/\_\_\_

Date Pinned: \_\_\_/\_\_\_/\_\_\_ Membership Card: Given \_\_\_/\_\_\_/\_\_\_ Mailed \_\_\_/\_\_\_/\_\_\_