



MEMBERSHIP APPLICATION

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I hereby apply for membership in CAVUNP and in Chapter: \_\_\_\_\_

Name: \_\_\_\_\_ Given Name: \_\_\_\_\_ Initials: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Citizenship Status: \_\_\_\_\_

Date of Enlistment: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_ Service Number: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

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Theatre(s) of Service with Peacekeeping Forces: \_\_\_\_\_

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Medals (and/or) Decorations: \_\_\_\_\_

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Are you currently a Serving Member \_\_\_\_\_ or a Retired Member \_\_\_\_\_ of the Canadian Forces: \_\_\_\_\_ RCMP: \_\_\_\_\_ Civilian  
Police Force: \_\_\_\_\_ Other: \_\_\_\_\_ (If Other Please Explain) \_\_\_\_\_

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Please list other associations of which you are a member: \_\_\_\_\_

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Applicant's Signature: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Mailing Address: (Apartment/Unit/Street Number) \_\_\_\_\_ Street Name and Type \_\_\_\_\_

City/Town/Municipality/etc \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

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**PLEASE NOTE**

1. Your membership fee, along with proof of Peacekeeping service must be submitted with this application. (Photocopies are acceptable)
2. If you are applying to the Headquarters Chapter, the initial membership fee is \$30.00. If applying to a local chapter, please check with that chapter membership member as fees do vary between chapters.
3. If you have no proof of Peacekeeping Service then your sponsor may certify personal knowledge of your peacekeeping service on this form or by separate correspondence to National Headquarters.
4. An applicant for Regular Membership must be a Canadian citizen and must hold the Canadian Peacekeeping Service Medal or must provide documentation to substantiate their service in one or more peacekeeping missions eligible for the CPSM.
5. An applicant for Associate Membership must provide documented proof of service in a peacekeeping mission approved by his/her government, or in the case of a landed immigrant his/her former government.

**DATA VERIFICATION AND APPLICATION APPROVAL  
BY CHAPTER**

Sponsor's Name: (Please Print & Sign) \_\_\_\_\_ Sponsor Membership Number: \_\_\_\_\_

Proof of Peacekeeping Service Verified: \_\_\_\_\_ If not verified, sponsor's written declaration attached in lieu: \_\_\_\_\_

Application approved by Chapter Membership \_\_\_\_\_ Dated: \_\_\_\_\_

Category of Membership upon application: REGULAR: \_\_\_\_\_ ASSOCIATE: \_\_\_\_\_ HONORARY: \_\_\_\_\_

If application is for HONORARY MEMBERSHIP attached are: Applicant's Biography \_\_\_\_\_ and

Supporting statement why applicant should become an honorary member and be signed by the Chapter President

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**NATIONAL HEADQUARTERS ADMINISTRATIVE USE ONLY**

\_\_\_\_\_  
(Name of Affiliate Chapter)

\_\_\_\_\_  
(Date Application Received)

Application for Membership accepted and recorded in CAVUNP Data base: \_\_\_\_\_

Applicant's Membership Number: \_\_\_\_\_

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**MAIL YOUR COMPLETED APPLICATION FORM TO THE LOCAL CHAPTER IN YOUR AREA**

**OR**

Canadian Association of Veterans in United Nations Peacekeeping  
L'Association Canadienne des Vétérans des Forces de Paix des Nations-Unies  
B.P./P.O. Box 46026  
2339 Chemin Ogilvie Road  
Gloucester, Ontario, Canada  
K1J 9M7

CAVUNP Home Web Page: [www.peacekeeper.ca/cavunp.html](http://www.peacekeeper.ca/cavunp.html)  
National Headquarters E-Mail Address: [cavunp@rogers.com](mailto:cavunp@rogers.com)