



Military Order of Stars and Bars

Life Membership Application

Society Number

Date Fees Paid In Full

(IHQ Office Use Only)

Applicant's Name: _____
(First) (Mid) (Last) (Suffix)

Address: _____
City State Zip

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Work Phone Home Phone Cell Phone Email Address

Date of Birth ____/____/____ Age: ____

MOSB Number Chapter Name & Number Society

Payment Rates

Under 20 Years Old	\$700
Age 20 – 29	\$600
Age 30 - 39	\$500
Age 40 – 49	\$400
Age 50 – 59	\$300
Age 60 – 69	\$200
Age 70 +	\$100

You or your Chapter Adjutant should send this completed form and all payments to:
MOSB International Headquarters
MOSB International Headquarters* PO Box 1700* White House, TN 37188-1700

Applicant's Printed Name Applicant's Signature

Date

Form revised December 2008