



TEXAS DIVISION  
SONS OF CONFEDERATE VETERANS

***LIFE MEMBERSHIP  
APPLICATION***

Member's Name \_\_\_\_\_  
(as it should appear on certificate)

Member # \_\_\_\_\_ Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Camp Name \_\_\_\_\_ Camp # \_\_\_\_\_

Send this form and a check made payable to Texas Division SCV in the amount of \$315.00 to:

Cooper Goodson  
Adjutant, Texas Division SCV  
725 David Drive  
Tyler, Texas 75703

**DIVISION ADJUTANT'S USE ONLY**

Checklist:

Date Received	_____	Letter w/certificate & badge sent to member	_____
Fee Amount	_____	Confirmation letter to Camp Adjutant	_____
Check #	_____	Posted to Member's New Record	_____