

# VETERAN FAMILY MEMBER APPLICATION

Applications can be mailed to:

Veteran Friendly Businesses, 3410 Plumtree Drive #101, Ellicott City, MD 21042



Eligibility: Current Spouse of Qualified Veteran\*, Widow, Widower, Adult Children (18 years or older), Blue Star Families, Gold Star Families or Current USAA and NFCU Members.

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

Address: \_\_\_\_\_

Relation: \_\_\_\_\_

How did you hear about the program? \_\_\_\_\_

Criteria: (Must provide Picture I.D. AND Membership I.D. to one of the following to be eligible)

USAA Member Card

NFCU Member Card

Proof of Relationship to Qualified Veteran\*:

1. Enter Veteran Friendly Business Member #: \_\_\_\_\_

2. Other Proof of Relationship: \_\_\_\_\_

\*A qualified Veteran is identified as someone who has a DD214 showing honorable or other than honorable discharge (dishonorable discharge is not accepted), a current membership to a Veterans Organization (that requires members to be a Veteran), a Veterans marked Maryland state drivers license or a form of Military ID.

Verified By: \_\_\_\_\_  
**PRINT NAME** **DATE** **CARD # ISSUED**

Please Select How You Would Like to Receive Your Card:

Mail My Card

Pick-Up Card at Program Sponsor Location

## AGREE AND ACCEPT:

By signing, you agree that the above information is true and submit an image for verification. DO NOT upload a Military ID or DD214. If you want to use one of these forms of identification, they will need to be verified in person. You also agree to receive text(s) and email(s) for communication. You do not have to be a resident in Howard County to be eligible. It is an honor to carry this card. All businesses operate independently. Contact information will only be used by the Veteran Friendly Businesses Organization and will not be given or sold to ANY third party. Information will be used to inform members of military/veteran events as well as information from participating Veteran Friendly Businesses.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**DATE**

## REVIEWED BY VETERAN FRIENDLY BUSINESSES COUNCIL MEMBER:

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**DATE**