



# The Descendants of Mexican War Veterans

## APPLICATION FOR MEMBERSHIP

MEMBER ID# \_\_\_\_\_  
FOR OFFICIAL USE ONLY

PLEASE PRINT (using blue or black ink) or FILL IN Mail hard copy by USPS .

### PART ONE: APPLICANT INFORMATION (All applicants must complete this section.)

Name (First, Middle, Last) \_\_\_\_\_

Street Address \_\_\_\_\_

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

Home Ph. \_\_\_\_\_ Business Ph. \_\_\_\_\_ FAX \_\_\_\_\_

Cell \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Application is for the following type of membership: (Check one space only)

Full Adult     Associate Adult     Junior Full     Junior Associate     LIFE Full     LIFE Associate

FOR Junior Membership Only - Date of Birth \_\_\_\_\_

### PART TWO: VETERAN ANCESTOR INFORMATION

(Only applicants for FULL MEMBERSHIP are required to complete this section.)

NOTES: If claiming eligibility through more than one ancestor, please attach a separate sheet for each.

\*A \$10.00 fee will be charged for each additional ancestor cover mailing / Processing of certificate(s).

Veteran's Name (First, Middle, Last) \_\_\_\_\_

Rank \_\_\_\_\_  Lineal or  Collateral Ancestor?

Military Unit in which veteran served: (Name or number of company, regiment, battalion, etc., or ship name if Navy or Marines.)  
\_\_\_\_\_

Dates of Active Service (Muster-in date to muster-out date, if known. Otherwise, give approximate dates.)  
\_\_\_\_\_

*I, the undersigned applicant, do hereby affirm that to the best of my knowledge and belief, all the information provided by me on this application form is true and correct. I further declare, if applying for adult membership, that I am over the age of eighteen years and of good moral character. I promise to abide by the by-laws of the society and to faithfully discharge any duties I may accept for the purpose of carrying out its aims and objectives.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*The Descendants of Mexican War Veterans will only accept documentation as outlined in our by-laws - SEE our Instructions sheet regarding acceptable documentation. Internet sites, LDS records, Ancestry.com are NOT recognized documentations and unacceptable per our membership guidelines.*

When this application or supplement application data is approved and signed by the D.M.W.V. undersigned officer or designated representative, it becomes the property of the Descendants of Mexican War Veterans (D.M.W.V.)

Check YES or NO in EACH statement:

YES     NO    I give permission to release copies of application papers to prospective members for genealogical purposes.

YES     NO    I give permission to release copies of proof documents to prospective members for genealogical purposes.

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I, the undersigned officer or designated representative of the Descendants of Mexican War Veterans, do hereby declare that I have examined this application and its accompanying proofs, and that the applicant has been accepted as a member of this organization.

Signature \_\_\_\_\_ Official Title \_\_\_\_\_ Date \_\_\_\_\_

**PART THREE: LINEAGE CHART**

*(Only applicants for FULL MEMBERSHIP are required to complete this section.)*

**To the Board of Directors of the Descendants of Mexican War Veterans:**

I, \_\_\_\_\_, do hereby apply for Full Membership in this organization by right of lineal or collateral kinship in the following line from: *(mark out relationships that do not apply).*

Name of Veteran Ancestor \_\_\_\_\_

who was born at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_

and died at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_

and who served in the War with Mexico, 1846-47-48.

I was born at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ .

I am the  son /  daughter of \_\_\_\_\_, and \_\_\_\_\_, his wife, and

I am the  grandson /  granddaughter of \_\_\_\_\_, and \_\_\_\_\_, his wife, and

I am the  great-grandson /  great-granddaughter of \_\_\_\_\_, and \_\_\_\_\_, his wife, and

I am the  2d great-grandson /  2d great-granddaughter of \_\_\_\_\_, and \_\_\_\_\_, his wife, and

I am the  3d great-grandson /  3d great-granddaughter of \_\_\_\_\_, and \_\_\_\_\_, his wife, and

I am the  4th great-grandson /  4th great-granddaughter of \_\_\_\_\_, and \_\_\_\_\_, his wife, and

*(For Collaterals Only)*

The above-named veteran was the  brother /  uncle or  cousin of Mexican War Veteran \_\_\_\_\_

**PART FOUR: MISCELLANEOUS VETERAN INFORMATION** (Optional)

In the space below, include any relevant information about the veteran. For example: Battles in which veteran participated, whether killed or wounded, if discharged for illness, received a disability and / or service pension, received a bounty land warrant, widow received pension or warrant, member of veterans organization, recipient of state or veterans organization medal, etc. Please provide location of grave, if known, and photograph of marker, if possible, for Mexican War Graves Register Project.

Find-a-Grave Memorial # \_\_\_\_\_ Cemetery Location \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you learn about the Descendants of Mexican War Veterans' organization?  SCV magazine;  SUV magazine;  Library;

Internet;  Relative;  Other \_\_\_\_\_