



IOWA MINUTEMAN CIVIL DEFENSE CORP

Volunteer Registration Application

STOP ILLEGAL IMMIGRATION

First Name _____ Middle _____
Last Name _____
Social Security # _____ Date of Birth _____
Address _____ Suite or Apt # _____
City _____ State _____ Zip Code _____
E-Mail Address _____
Phone _____ Cell _____

Years at Current Address _____ (if less than 1 year, please list previous address below)
Previous Address _____
Previous Address City _____ State _____ Zip Code _____

A \$50 non-refundable volunteer registration fee is required to cover fees for a security background check and administrative costs. If you include a photocopy of your Concealed Weapon License and/or your Military ID card attached to this application, then the \$50 registration fee is waived.

Concealed Weapon License #* _____ Expires _____

Can you serve on the border _____ Preferred State _____

Are you interested in a leadership position? (check one) Yes No

Credit Card Billing Information: Card Type _____ Card # _____
Expiration Date _____ Security Code (last 3 digits on back of card) _____
Your Full Name* _____
Billing Address** _____
Billing City** _____ Billing State** _____

Signature _____ Date _____

*as it appears on your credit card
**as it appears on your credit card billing statement

If paying by check, make it payable and mail to:
Minuteman Civil Defense Corps
P O Box 003
Griswold, IA 51535

Visit our site @ www.MinutemanIowa.com