



SONS OF AMVETS

DEPARTMENT OF FLORIDA

Veterans Mobility Assistance Program Application



With the ongoing support of grants provided by the AMVETS Department of Florida Service Foundation, the Sons of AMVETS Department of Florida is committed to assisting our nation's Veterans through our Veterans Mobility Assistance Program. All requests for assistance will be reviewed by the Sons of AMVETS Department of Florida Executive board. Please provide the information below and forward your request to the SOA Department of Florida Commander by e-mail or by USPS mail. (addresses below).

Date: / /

Date of birth: / / Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Height: _____ Weight: _____ (models vary according to an individuals size)

Veterans Service Organization Member (AMVETS, VFW, American Legion)? _____ Post# _____

What years did you serve? _____ Branch of service: _____

Briefly describe your duties, stations of service and any awards received: _____

Briefly state reason for requesting a unit and type of unit desired. Example:small 3 wheeler,4 wheeler, Power chair, etc..

Type of unit: (Circle one) 3 wheeler 4 wheeler Power chair Other: _____

Signature _____

The Sons of AMVETS Department of Florida is not liable for or responsible for the maintenance/repair of the unit or for any property damage or bodily injury resulting from the operation of this equipment. Your signature above acknowledges your agreement with the above liability statement

Please send this completed form to:

. (08-25-2021)

	SOA Dept. of FL Commander Nathan Wuesthoff 3886 Prescott Loop Lakeland, FL 33810 nathancomar@live.com (863) 808-8273	
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