

Please read the completion instructions on the reverse



The South Atlantic Medal Association (1982)

Application form for Full Membership (For Associate/Island Membership please obtain Forms AP2/AP3)

1. Surname (Family Name) 2. Forenames

3. Date of Birth / / 4. Surnames used between 2 April and 14 June 1982
If different from above

5. Telephone: Home: Mobile:
email:

6. Address Now (Include postcode)

7. Address in 1982 (If different)

About you and your service for which you received the South Atlantic Medal (82)

8. Tick appropriate Service

8.1 Royal Navy	<input type="checkbox"/>	8.2 Royal Marines	<input type="checkbox"/>	8.3 Royal Fleet Auxiliary	<input type="checkbox"/>
8.4 Army	<input type="checkbox"/>	8.5 Royal Air Force	<input type="checkbox"/>	8.6 Merchant Navy	<input type="checkbox"/>
8.7 Civil Service	<input type="checkbox"/>	8.8 Civilian	<input type="checkbox"/>	8.9 Support	<input type="checkbox"/>

9. State your Regt, Unit, Ship or Sqn you served with in 1982

Were you wounded Yes / No

10. Date you joined your Service / / 11. Date of leaving your Service / /

12. Reason for leaving your Service

13. Your service, pay or other number during 1982

14. Your rank on 14 June 1982

15. Other Awards or Honours

16. Your rank now or on leaving service

17. Please describe briefly your involvement in the South Atlantic Campaign

18. Declaration- I certify that the information given in this application is true and correct to the best of my knowledge. I agree to be bound by the South Atlantic Medal Association (1982) Constitution and Rules.

Signature:

Date: / /

Name and
Initials (Blocks)

19. Passport Sized Photograph

For Office Use

Membership Date	Fee Paid - Method £	Form Checked By	Membership Number
Membership Amendment	1 2 3	4 5	6 7

INSTRUCTIONS AP1

THE SOUTH ATLANTIC MEDAL ASSOCIATION (1982)

APPLICATION FOR FULL MEMBERSHIP

INSTRUCTIONS FOR COMPLETING FORM AP1 (WHITE)

Fill in this form if you wish to join the Association and you have been awarded the South Atlantic Medal (1982)

Style for completion - Please use dark ink and apart from the signature box, complete in BLOCK CAPITALS.

The boxes are numbered and you should complete each box in accordance with the instructions below.

- 1 Complete your surname, family name or formal name.
- 2 Complete your personal names, Christian name or other names up to maximum of two.
- 3 Complete your date of birth in the form DD/MM/YY - e.g. - 14/06/82
- 4 If you have used a different surname/family name during the conflict because of marriage, deed poll or other reason.
- 5 List, with area codes, your telephone numbers on which you can be most conveniently be contacted on.
- 6 Complete the address in conventional style and include your post/zip code and country.
- 7 Complete your permanent home address during the conflict.
- 8 Tick the box to show the appropriate Service clearly.
- 9 Include the Branch, Ship, Regiment, Corps or Squadron where appropriate, and state Yes/No to the supplementary question.
- 10 Give the date you first joined the Service with which you were serving during the conflict.
- 11 Give the date that you last left the Service with which you were serving.
If still serving complete as "N/A".
- 12 Give the reason for leaving that service, i.e. retirement, end of contract, left to join another service. If still serving complete as "N/A".
- 13 Give the number with which your service used to identify you uniquely.
- 14 Give your rank or status on 14 June 1982: i.e. First Officer, Colonel, Colour Sgt, etc.
- 15 List any other honours or awards made to you at any time and still valid, i.e. MBE, OBE etc.
- 16 Give your rank on last leaving the Service. If you have not left the Service please state your current rank.
- 17 SAMA 82 wishes to gain as many members as possible through internal recruitment. If you can supply one or more names and address, then please use a separate sheet. Omit details that may be subject to National Security restrictions i.e., members of Special Forces.
- 18 Read the full conditions of membership, sign and date your application. Please attach to your application payment of £10.00, made payable to the South Atlantic Medal Association (82). This payment is a one off payment for a life time membership. Should your application be unsuccessful, your payment will be returned.
- 19 Provide 1 passport size photograph and sign the back of it.
- 20 Clip the photograph, payment and form together using paper clip (not staple) and post your application to the Association Secretary at:

Office contact details:

Unit 25, Torfaen Business Centre, Panteg Way, New Inn, Pontypool, Torfaen, NP4 0LS

Tel 01495 741592

Email secretary@sama82.org.uk

Web www.sama82.org.uk

SOUTH ATLANTIC MEDAL ASSOCIATION 1982