



Texas Border Volunteers

Membership Application Form

www.TexasBorderVolunteers.org

TBV Use Only: ID#		Contact Date:	
Name (Last):	(First):	(Middle):	
Call Sign/CB Handle/Nickname:		Birth Date:	
Disabilities/Medical Conditions:			
Street Address:			
City:	State:	Zip:	
Email address:			
Home Phone:		Cell Phone:	
Emergency Contact:			
Relationship:		Phone:	
Employment Status:			
Special Skills/Abilities:			
Certifications and Experience			
Concealed Handgun License Y/N	Issuing State:	Number:	Exp. Date:
Law Enforcement:			
Military:			
Experience with other Border Watch Groups:			
Signature:		Date:	

Please attach a head shot photo to use on your ID card, and either a copy of your CHL **OR** an application fee of \$50.00. Mail these items along with this signed application form to:

*Texas Border Volunteers, Inc.
791 Hwy 77N
Suite 501C-145
Waxahachie, Texas 75165*

*For Assistance, Contact:
VOL052000-tbvmbmrship@yahoo.com*