

# AHEPA VETERANS REGISTRATION

AHEPA Medal for Military Service is awarded to all AHEPA veterans in honor of their service to the United States.



*“The Mission of the Order of AHEPA Veterans Committee is to archive and recognize all veterans of the Order and Hellenic community through sound communication and publication. Furthermore, to conduct fundraising and philanthropic outreach through a cohesive, limited, yet well-defined activity that reflects well on the Order of AHEPA and brings credit to the organization at large”*

AHEPA Medal is available for all AHEPA Family members, SOP & MOA will be respective adult group  
AHEPA Veterans committee is run under direction of AHEPA National Lodge, AHEPA.org

The AHEPA Medal for Military Service, acknowledged by the 106<sup>th</sup> Congress, was presented to all AHEPA veterans present at the 34<sup>th</sup> Biennial Congressional Banquet, March 29, 2000. The Supreme Lodge then encouraged its districts and chapters to present this medal to its deserving veterans unable to attend this banquet. It is this committee’s intent to register AHEPA Veterans and have the AHEPA Medal presented at appropriate events at the District and Chapter levels. Funds collected through this effort cover medal production and other administrative costs to include shipping. Remaining proceeds will be donated to the AHEPA Veteran Affairs projects annually.

**The eligibility requirement for AHEPA Medal for Military Service includes Honorable Service and Discharge.**

Service includes Active Duty, National Guard, or Reserve status of the United States Armed Forces. Please fill out the form and use this information to register at <https://ahepaveterans.org>. **MAIL THIS FORM ONLY IF YOU CANNOT COMPLETE THE REGISTRATION PROCESS ONLINE, NEED ASSISTANCE, OR IF SENDING A CHECK.**

File a copy with your chapter Secretary after registration is complete. Complied excel sheet can be attached for multiple awards ordered by respective Chapters or Districts Veterans Committee Chairman. Please have a completed bottom form below for each medal requested

Mailed to: LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

E-Mail: \_\_\_\_\_ DAYTIME TELEPHONE: (\_\_\_\_) \_\_\_\_\_

1. Medal QTY / 1 per Veteran or Family of Deceased Veteran, qty \_\_\_\_ @ \$ \_\_\_\_\_ (\$10.00 per medal)
2. Donation to AHEPA Veteran Affairs projects (\$10.00 per, requested) \$ \_\_\_\_\_ (donation)

Remit your check to “AHEPA” (or credit card via the website) \$ \_\_\_\_\_ TOTAL

Pricing: **\$20.00 total** is requested per medal to provide a Medal and to assist the AHEPA Veteran Affairs Projects

Address if mailing in a check:

AHEPA HQ (Attn: Veterans Affairs)

Note: Please write “**Veterans Medal**” in memo section of check

1909 Q Street NW

Washington D.C., 20009

Please fax documents to 866.679.6562 or email to [webmaster@ahepaveterans.org](mailto:webmaster@ahepaveterans.org) if preferred, proof of payment will be needed before any medals are shipped

## VETERAN REGISTRATION

*Please have a completed form below for each medal requested*

VETERANS LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_ DISTRICT # \_\_\_\_\_ CHAPTER # \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

1. (Check One) AHEPA \_\_ DOP \_\_\_\_\_ MEMBER # \_\_\_\_\_
2. (Check One) Army \_\_\_\_\_ Navy \_\_\_\_\_ Marine Corp \_\_\_\_\_ Air Force \_\_\_\_\_ Coast Guard \_\_\_\_\_
3. (Complete) Highest Rank: \_\_\_\_\_ Dates of Service (Years only) \_\_\_\_\_
4. (Complete) Highest Medals and Decorations: \_\_\_\_\_
5. (Circle) Retired: Y / N Confirm Honorable Discharge if **not** retired: Y / N
6. Personal Information:

**Note:** Families may also register deceased Veterans for inclusion in our future “Virtual Wall of Honor”.

Additional information is required about the deceased Veteran:

1. Killed in Action (KIA): Date \_\_\_\_\_ Conflict / Location: \_\_\_\_\_
2. Missing in Action (MIA): Date \_\_\_\_\_ Conflict / Location: \_\_\_\_\_
3. Deceased Veteran: Date \_\_\_\_\_ Burial City: \_\_\_\_\_