

**AN INTERNATIONAL ORGANIZATION**

**UCMO-HUMPHREYS 304  
WARRENSBURG, MO 64093**

**PHONE: 660-543-4971**

**EMAIL: [bryant@ucmo.edu](mailto:bryant@ucmo.edu)**

**VETERANS OF SAFETY**

FOUNDED OCTOBER 9, 1941



A NOT FOR PROFIT ORGANIZATION

**APPLICATION FOR MEMBER EMERITUS**

NAME \_\_\_\_\_  
First Middle Last

ADDRESS \_\_\_\_\_  
Street City State Zip

PHONE Area Code ( ) \_\_\_\_\_

I was born on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

**Check One**

- ( ) I have retired from the field of Safety Engineering at the normal retirement age for my company.
- ( ) I am 65 years of age or older but am continuing in partial employment in Safety Engineering.
- ( ) I retired from the field of Safety Engineering due to physical disability.

**Check One**

- ( ) I do not receive pay for Safety Engineering services while in retirement.
- ( ) I receive part time pay for Safety Engineering services while in retirement.

I hereby apply for Member Emeritus classification in VETERANS OF SAFETY. If accepted, I agree to continue to support the cause of human conservation and to lend my experience in furthering the development of the Safety Engineering profession. I further agree to notify the Executive Director promptly of any future changes of address. I will support our National Organization and will honor such assessments as its Board of Directors may in the future deem necessary, but not to exceed half the amount of annual membership dues.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
President

\_\_\_\_\_  
Vice-President

\_\_\_\_\_  
Executive Director