

2017 Central Valley Veterans' "Stand Down" Registration

September 19-22, 2017 • 3585 N. Blythe Ave. • Fresno, CA 93722

◆Pre-registration is only required for Veterans' Court◆

•Registration for Stand Down will be open throughout the event for all others•

Name:(Last)		(First)	(Middle)	
Soc. Sec. Number:(Last 4 digits Only)		Driver's License Number:		State Issued:
Contact Phone:		Date of Birth: (mm/dd/yyyy)		Age: Gender:
Race / Ethnicity: (Circle)		Caucasian Native American	African American Asian	Hispanic Other_____
Branch of Service:		From:	To:	
Characterization of Discharge:				
Source of Your Income:				
Will any adult or child family member be attending the Stand Down with you? YES How many_____ NO				
Are you currently homeless? YES NO				
Do you plan on staying overnight? YES NO (Must stay at least two (2) nights Wed. the 16 th and Thurs. the 17 th)				
Will any adult or child family member be staying with you overnight? YES NO				
Name:		Gender:	M F	Age:
Name:		Gender:	M F	Age:
Name:		Gender:	M F	Age:
Have you applied for VA medical benefits? YES NO		Are you currently receiving VA healthcare? YES NO		
Do you have problems with: Alcohol Drugs Other Addictions_____				
Current mental health needs: PTSD Sexual Trauma Other_____				
Applications with <u>Court Requests</u> must be submitted by September 1, 2017 . Failure to fill the form out correctly could result in denial for veteran court. Please fax completed form to Dave Rose at (559) 600-7745, mail or deliver to:				
Veterans Service Office 1320 W. Shaw Ave., Ste. 105 Fresno, CA 93710 Bus Route #9		Fresno VA Hospital/Homeless Program Building 27, M/S 122 (2 nd Floor) 2615 E. Clinton Ave. Fresno, CA 93703, Bus Routes #32 & 39		San Joaquin Valley Veterans 1617 E. Saginaw Way, #102 Fresno, CA 93704 Bus Routes #30 & 45
Outstanding Warrants:		Request Veterans Court: YES NO		
<i>Please note that cases with Fresno County Department of Child Support Services will not be heard by this court, however legal advice provided by Central California Legal Services will be available on site.</i>				
_____I do hereby, for myself, my heirs, executors and administrators, hold harmless and release from responsibility CVV and all officers, directors, employees, agents and volunteers of the organization, acting officially or otherwise, the VA, the County of Fresno and any and all support and service providers, from any and all claims, demands, actions or causes of action which in any way arise from the my participation at the CVV Stand Down. I acknowledge that all information collected on this form is confidential and will only be used for the purpose of the CVV Stand Down.				
_____Signature of Veteran			_____Date	
FOR OFFICIAL USE				
Location of Application: CVSO VA SJVV		Date Rec'd:	Signature:	
Date of Approval:		Signature:		

**For More Information, please contact:
David Rose (559) 706-6270 or John Schuler (559) 977-3697**

Tent Assignment: