Dear BVA Membership Coordinator,

The above-named veteran expresses the desire to seek membership in the Blinded Veterans Association (BVA). It is understood that membership requires verification of military service and legal blindness.

_____ VA records show the above-named veteran meets the following criteria:

Central visual acuity of 20/200 or less in the better eye with corrective lenses, or a Visual field restriction of no greater than 20 degrees’ or less in the better eye or ICD-10-CM Diagnosis Code H54.8 “Legal blindness, as defined in USA”.

Signature: _______________________________ Date: ______________________

Revised September 15, 2020