VFW AUXILIARY MEMBERSHIP / MEMBER TRANSFER APPLICATION

Recruited/Recommended by:		Recr	uiter Member ID	
Auxiliary No. City		State Mem	ber ID (If already a member)	
Annual Membership Life Me	mbership			
	ed Previous Member ID N	lo.	Previous Auxiliary	/
			arge - VFW Auxiliary National Headquarters	
THESE FIELDS REQUIRED		monisor at Eargo		
Name			Date of Birth	
Address			Male	Female
City	State ZIP	Phone	Email	remaie
Oity		1 Hone	Linai	
POST-AFFILIATED (*Must be a m	nember to the VFW Post affiliate	ed with the Auxiliary to which y	ou are applying.)	
Relationship to Eligible Veteran* VFW Membership ID				
LIFE MEMBER TRANSFER	Previous Auxiliary			
ANNUAL TRANSFER	revious Auxiliary		Paying Nonpaying	g
				-
	RTING TO LIFE (Fill out Lif	e Membership information belo	ow.) Previous Auxiliary	
NON-AFFILIATED (*Veteran is not	ot a member of the VFW Post af	filiated with the Auxiliary to wh	ich vou are applving.)	
		,	, , , , , , , , , , , , , , , , , , ,	
Relationship to	Eligible Veteran*		VFW Post (If applicable)	
Name of campaign ribbons or me	edals:			
Dates of Service:	to	Locatio	on:	
I attest that I am a citizen of the United States	s or a U.S. National, and am at le	east 16 years of age. I further :	state that I believe in God. I pledge to c	omply with the National
Bylaws of the Veterans of Foreign Wars of the the best of my knowledge, including my state	e United States Auxiliary. I attest			
Investigating Committee Signatures				
1 X	2 X		3 X	
Per Section 102 of the National Byla	aws. Rejected Acc	epted Meeting Date	Obligated Dat	е
LIFE MEMBERSHIP ONLY Check here if this is a gift.			LIFE MEMBERSHIP ONLY	
Credit cards may NOT be used for initial payment of Annual Due		ACH	(Bank withdrawl)	MEMBERSHIP FEES
Cash Check Visa Mas	sterCard Discover	AMEX Name of	f Bank	Life Membership fees are not
Life Membership Fee				refundable. Attained age at
Name on credit card		Bank Ro	outing No.	12/31 of year applying for Life
Billing address for card				Membership. Through 20 \$253
City	State ZIP	Account	No.	21-25 \$242
Credit Card No.				26-30 \$230 31-35 \$219
CVV Code Exp. Date			Attach voided check HERE. 36-40 \$213 41-45 \$201	
Signature X	Date	(Required	(Required) 46-50 \$196 51-55 \$184 56-60 \$173	
OBLIGATION In the presence of Almighty	God and the members of this c	organization here assembled	l do of my own free will and	61-65 \$161
accord, solemnly promise that I will never wrong or defraud this organization nor a member thereof nor permit either to be wronged if in my 71-75 \$132				
will be faithful to the United States of America	, obedient to the laws and loya	I to the Flag. Should my mem	nbership with this organization	76-80 \$109 81-85 \$86
cease in any way, I will consider this obligation	as philology outside of the organ	nzauon as triougri i nad rema	amed a member. I do so promise.	86-90 \$69 91 and over \$58

(Must be signed by all members.)