VFW AUXILIARY MEMBERSHIP / MEMBER TRANSFER APPLICATION

An incomplete application could delay your membership start date.

	٩r	policant	complete	s sections A.	В.	. C or D and F.	Auxiliaries/De	partments com	plete section E
--	----	----------	----------	---------------	----	-----------------	----------------	---------------	-----------------

Recruited/Recommended by:		Recruiter I	Member ID								
Auxiliary No. City	State	Member II	O (If already a member)								
Annual Membership Rejoin											
Life Membership Transfer											
Member at Large in Department of Member at Large - VFW Auxiliary National Headquarters											
(If not a transfer, skip to B.)	not a transfer, skip to B.)										
LIFE MEMBER TRANSFER Previous	ious Auxiliary										
ANNUAL TRANSFER Previous	s Auxiliary	П	Paying Nonpaying								
ANNUAL TRANSFER CONVERTING	G TO LIFE (Fill out Life Membe	_									
THESE FIELDS REQUIRED											
Name			Date of Birth								
Address			Female	Male							
City	te ZIP	Phone	Email								
POST-AFFILIATED (*Must be a current m											
Relationship to Eliq	gible Veteran*	V	FW Membership ID								
NON-AFFILIATED (*Veteran is not a curre	ent member of the VFW Post affilia	ated with the Auxiliary to which	you are applying.)								
	le Veteran*		V Post (If applicable)								
Name of campaign ribbons or medals:											
Dates of Service:	to	Location:									
Investigating Committee Signatures											
1 X	2 X	2	X								
Per Section 102 of the National Bylaws.		Meeting Date	Obligated Date								
	<u> </u>	g Date	osinguiou buto								
By signing this, I agree to the stated charges for a Life Me OBLIGATION In the presence of Almighty God and	•	on here assembled I do of m	y own free will and								
accord, solemnly promise that I will never wrong or defi power to prevent it. I will never propose for membership	raud this organization nor a mem	nber thereof nor permit either	to be wronged if in my	LIFE							
I will be faithful to the United States of America, obediencease in any way, I will consider this obligation as bindi	nt to the laws and loyal to the Fla	ag. Should my membership w	vith this organization	MEMBERSHIP FEES							
I attest that I am at least 16 years of age. I pledge to compl	ly with the National Bylaws of the V	eterans of Foreign Wars of the	United States Auxiliary.	Life Membership fees are not refundable.							
I attest I am not eligible for membership in the VFW. I furthe relationship to the Veteran.	er aπest that the above is true and	correct to the best of my knowl	leage, including my stated	Attained age at 12/31 of year applying for							
Signature X		Date		Life Membership. Through 20 \$253							
(Must be signed by all members.)				21-25 \$242 26-30 \$230							
	nere if this is a gift.			31-35 \$219 36-40 \$213							
Credit cards may NOT be used for initial payment of A		i të. A	lomborobin Fac	41-45 \$201 46-50 \$196							
Cash Check Visa MasterCa	rd Discover AMEX	LITE IV	lembership Fee	51-55 \$184 56-60 \$173							
Name on credit card				61-65 \$161 66-70 \$150							
Billing address for card				71-75 \$132 76-80 \$109							
City	ZIP			81-85 \$86 86-90 \$69							
Credit Card No.		CVV Code		91 and over \$58							
Exp. Date	Date Signat	ure X									
				Revised May 2022							