VFW Membership Application – front

			BERSHIP TYPE (choose one)	
AIVIE	TIONS OF THIS FORM ARE OBSOLETE.	ANNUAL MEMBERSHIP \$	*	
	MIDDLE LAST	- ANNUAL MEMBERSHIP WITH	AUTO-RENEWAL \$	
DDKF22	3.4	. LIFE MEMBER - FULL FEE \$_		
TY	STATE ZIP		PLAN: \$45.00 initial payment/11 monthly payments	AMEX
ATE OF BIRTH	GENDER: SSN (optional)	Installment options require c application you acknowledge an Payment Plan and Installment o	e on reverse side. Automatic Payment Plan and redit/debit card for processing. By signing this d agree to the terms and conditions of the Automatic ptions, if selected.	DISCOVER AMOUNT: \$_
RANCH OF SERVICE A	RMY NAVY AIR FORCE MARINES OAST GUARD SPACE FORCE AL(s) and/or Service	QUART NEW Post No		VISA
		TRANSFER From Post No transfer complies with Sec. 107	to Post No	MASTERCARD Exp.Date
	DREIGN SERVICE:		member no.	AS
		QUARTERMASTER:signature	member no.	sard no.
	VFW Memb	aracida y dalamager.		
Member Receive Post No Receive	The Review Committee has performed its duties and re			rs below)
Membership App Received from Post No: Received By: (circle oi			rejection. (signatures of Committee member	rs below) Date
Membership Application Received from Post No: Received By: Received By:	Committee member Comm	commends approval nittee Member PLEASE SEPARATE FORMS E	rejection. (signatures of Committee member Committee Member	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Membership Application - Vete Received from Post No: Received By: (circle one) CASH	Committee member Comm	commends approval nittee Member PLEASE SEPARATE FORMS E	rejection. (signatures of Committee member Committee Member	Date
nip Application from	Committee member Comm	nittee Member PLEASE SEPARATE FORMS E AID:	rejection. (signatures of Committee member Committee Member	Forces, that my discharged from military ed to a campaign ribbon ice or; (2) I have served re Pay. I further give