

# VFW AUXILIARY MEMBERSHIP / MEMBER TRANSFER APPLICATION

An incomplete application could delay your membership start date.

**Applicant completes sections A, B, C or D and F. Auxiliaries/Departments complete section E.**

**A**

Recruited/Recommended by:  Recruiter Member ID

Auxiliary No.  City  State  Member ID (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.)**

☐ **LIFE MEMBER TRANSFER** Previous Auxiliary

☐ **ANNUAL TRANSFER** ☐ Previous Auxiliary  ☐ Paying ☐ Nonpaying

☐ **ANNUAL TRANSFER CONVERTING TO LIFE** (Fill out Life Membership information below.) Previous Auxiliary

**B**

THESE FIELDS REQUIRED

Name  Date of Birth

Address  ☐ Female ☐ Male

City  State  ZIP  Phone  Email

**C**

☐ **POST-AFFILIATED** (\*Must be a current member of the VFW Post affiliated with the Auxiliary to which you are applying.)

Relationship  to Eligible Veteran\*  VFW Membership ID

**D**

THESE FIELDS REQUIRED

☐ **NON-AFFILIATED** (\*Veteran is not a current member of the VFW Post affiliated with the Auxiliary to which you are applying.)

Relationship  to Eligible Veteran\*  VFW Post (If applicable)

Name of campaign ribbons or medals:

Dates of Service:  to  Location:

**E**

Investigating Committee Signatures

1 ☒  2 ☒  3 ☒

Per Section 102 of the National Bylaws. ☐ Rejected ☐ Accepted Meeting Date  Obligated Date

**F**

By signing this, I agree to the stated charges for a Life Membership fee.

**OBLIGATION** In the presence of Almighty God and the members of this organization here assembled, I do of my own free will and 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 power to prevent it. I will never propose for membership any person not eligible, according to our Bylaws. I further state that I believe in God. I will be faithful to the United States of America, obedient to the laws and loyal to the Flag. Should my membership with this organization cease in any way, I will consider this obligation as binding outside of the organization as though I had remained a member. I do so promise.

I attest that I am at least 16 years of age. I pledge to comply with the National Bylaws of the Veterans of Foreign Wars of the United States Auxiliary. I attest I am not eligible for membership in the VFW. I further attest that the above is true and correct to the best of my knowledge, including my stated relationship to the Veteran.

Signature ☒  Date

(Must be signed by all members.)

**LIFE MEMBERSHIP ONLY** ☐ Check here if this is a gift.

Credit cards may **NOT** be used for initial payment of Annual Dues.

☐ Cash ☐ Check ☐ Visa ☐ MasterCard ☐ Discover ☐ AMEX  Life Membership Fee

Name on credit card

Billing address for card

City  State  ZIP

Credit Card No.  CVV Code

Exp. Date  Date  Signature ☒

## LIFE MEMBERSHIP FEES

Life Membership fees are not refundable.

Attained age at 12/31 of year applying for Life Membership.

Through 20	\$253
21-25	\$242
26-30	\$230
31-35	\$219
36-40	\$213
41-45	\$201
46-50	\$196
51-55	\$184
56-60	\$173
61-65	\$161
66-70	\$150
71-75	\$132
76-80	\$109
81-85	\$86
86-90	\$69
91 and over	\$58