Branch of Service:

☐ Air Force ☐ Army
☐ Marines ☐ Navy
☐ Coast Guard

VFW Membership Application
VETERANS OF FOREIGN WARS OF THE UNITED STATES

Current Status:

☐ Active Duty
☐ Reserve
☐ National Guard

Name _____
(Type or Print) Last First Middle

Present Address _____
Street and No. City State Zip

Date of Birth _____ SSN _____ Phone _____

E-mail _____

Foreign Service from: _____ to _____
Date Date

Where _____

Name of Campaign Ribbons or Medals _____

Hometown/Permanent address: _____
Street and No. City State Zip

Post No. _____ ☐ New ☐ Reinstate ☐ Annual ☐ Life (see back) ☐ Transfer (Please attach MCR form)

Old Post No. _____ ID # _____

I have investigated the character and campaign medal service of the applicant and hereby endorse him/her as eligible and worthy of membership in the VFW.

Recruiter Card No. _____ Recruiter Signature: _____

Recruiter (Please Print) _____ Date _____

(NATIONAL COPY - SUBMIT WITH TRANSMITTAL FORM)

I want to pay my membership fee by credit card.
(Not valid in non-direct dues states for annual membership.)

☐ MasterCard ☐ VISA ☐ Discover

Card No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Exp. Date ___ / ___ $_____

Signature _____