



## MENS AUXILIARY MEMBERSHIP APPLICATION

**VFW Post #1263  
416 Burnett Ave. S.  
Renton, WA 98055  
(425)255-9010**

New                       Reinstated                       Transfer Aux # \_\_\_\_\_

I hereby apply for annual membership in VFW Mens Auxiliary #1263 located in Renton, WA

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Email address \_\_\_\_\_

Relationship \_\_\_\_\_ to \_\_\_\_\_

Member of VFW Post \_\_\_\_\_

I am a current/former member of Auxiliary # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Membership # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please submit qualifying DD-214 or other proof of required service and proof of your relationship to that qualified service member within 60 days

THIS IS A PERMANENT RECORD USE INK