



## MEMBERSHIP APPLICATION MILITARY ORDER OF THE COOTIE AUXILIARY

Date: \_\_\_\_\_

Check Which Below

New Member

☐

Transfer Member

☐

Reinstated Member

☐

Transfer From

Aux. No. \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Member ID No. \_\_\_\_\_

Show above name, number and location of Pup Tent Auxiliary

Applicant's Name (Print) \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip

E-Mail \_\_\_\_\_ Telephone Number \_\_\_\_\_

Birth Date \_\_\_\_\_ Dues paid to December 31, \_\_\_\_\_

Member of Post # \_\_\_\_\_ Auxiliary Phone # \_\_\_\_\_

Located in \_\_\_\_\_  
City State

I certify that I am an active member of  
the V.F.W. of the U.S. Auxiliary and am  
desirous of becoming a member of the  
M.O.C. Auxiliary

Recommended and Verified by:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Accepted: Yes ☐ No ☐

Date \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

2- Copy to GRAND TREASURER  
1 - Copy for LOCAL AUXILIARY Files