

Cpl. Walter F. Bruce VFW Post #1146
AUXILIARY APPLICATION
28404 Jefferson St. Clair Shores, MI 48081

Thank you for your interest in joining the Auxiliary. Attached is a membership form you will need to complete. Please make sure you fill out and sign in both **areas.

Post Affiliated: (Must be a current member to the VFW Post affiliated with the Auxiliary you are applying). You will NEED the Eligible Veteran name & VFW Membership ID # and your relationship to Eligible Veteran. This information then will be given to the Quartermaster to confirm the Veteran is a member. *You will also have to submit a copy of the Eligible Veteran DD214 or Proof of Eligibility.*

Non-Affiliated: (Veteran is not a member of the VFW Post affiliated with the Auxiliary to which you are applying). You will NEED the Eligible Veteran name, the VFW Post # (if applicable) and your relationship to Eligible Veteran. *You will also have to submit a copy of the Eligible Veteran DD214 or Proof of Eligibility.*

Along with the membership form, you will need:

1. A copy of the DD214 - IF NOT POST AFFILIATED (Certificate of release or Discharge from Active Duty) attached to the membership form. If you need a copy of the DD214, you can go online to: <http://vetrecs.archives.gov> or fill out form 180 and mail back.
*Cash or Check must be with application.
*Continuous member (pays dues yearly) – \$25 + \$10 Adm. Fee (1 time only) = \$35.
*Life Member – see application form for amount + \$10 Adm. Fee (1 time only) + \$1 Key Card for Clubroom
2. Mail application to: Kay Eiswirth 25578 Island View Dr. Harrison Township, MI 48045 or to the above Bruce Post address marked Auxiliary Application. You can drop off at the Quartermaster station or you can put in the Auxiliary box by the pool table in the Club Room marked Auxiliary Application.

The application must be approved and voted on the floor of our meeting. We meet the 1st Thursday of the month at 7:30pm. Once application has been accepted, you will receive a call from the secretary. Please be patient. Until approved on floor at meeting there is nothing we can do to expedite.

If you have any questions, you may contact:

Membership
Kay Eiswirth
586-413-9934
keiswirth@yahoo.com

Treasurer
Terri McCloy
586-899-9554
terri_mccloy@wowway.com

Auxiliary President
Diane Stanley
586-322-1575
oma.stanley@gmail.com

THANK YOU FOR YOUR INTEREST IN JOINING THE VFW AUXILIARY!

Eligibility to the VFW Auxiliary:

*Must be at least 16 years old and a citizen of the United States

***Those eligible:**

**Husband/Wife, Widower/Widow, Father/Mother, Grandfathers/Grandmothers, Sons/Daughters,
Grandsons/Granddaughters, Brothers/Sisters**

Of persons who were or are eligible for membership in the VFW of the United States

*Must have received a campaign medal for overseas serve, have served 30 consecutive or 60 non-consecutive days in Korea, or have ever received hostile fire or imminent danger pay.

MEMBERSHIP/MEMBER TRANSFER APPLICATION PLEASE PRINT CLEARLY

Recruited/Recommended by: _____ Recruiter Member ID _____

Auxiliary No. _____ City _____ State _____ Member ID (If already a member) _____

Annual Membership Life Rejoined Previous Member No. _____, Previous Auxiliary _____

Member-at-Large Life Member-at-Large in Department of _____ or in National

These fields required. Name _____ Date of Birth ____/____/____
 Address _____ Male _____ or Female _____
 City _____ State _____ ZIP _____
 Phone (____) _____ - _____ Email _____

POST AFFILIATED: (*Must be a member to the VFW Post affiliated with the Auxiliary to which you are applying.)

Relationship _____ to Eligible Veteran* _____ VFW Membership ID _____

LIFE MEMBER TRANSFER, Previous Auxiliary _____ Accepting Treasurer's Signature _____

Date _____

ANNUAL TRANSFER, Previous Auxiliary _____ Paying _____ or Nonpaying _____? (check one)

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

NON AFFILIATED: (*Veteran is not a 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: _____

I attest that I am a citizen of the United States or a U.S. National, and am at least 16 years of age. I further state that I believe in God. 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.

Applicant's Signature _____ Date _____

Investigating Committee: 1) _____ 2) _____ 3) _____

Per Section 102 of the National Bylaws. Rejected Election Date ____/____/____ Obligated Date ____/____/____

LIFE MEMBERSHIP Check here if this is a gift.
 Card will be mailed to the Auxiliary Treasurer.
 Payment: 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. ____/____/____
 Signature _____ Date _____

LIFE MEMBERSHIP ACH (Bank withdrawl)
 Name of Bank _____
 Bank Routing No. _____
 Account No. _____

Attach voided check HERE. (Required)



LIFE MEMBERSHIP FEES
Effective 1/1/2017

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

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. Signature _____ (Must be signed by all members.)