



VFW Membership Application



PLEASE ENTER YOUR PERSONAL INFORMATION

Name: _____
Last First MI

Address: _____
Street City State Zip

E-mail: _____ Phone: _____

Birthdate: _____

SERVICE INFORMATION

Branch of Service: ☐ ARMY ☐ MARINE CORPS ☐ NAVY ☐ AIR FORCE ☐ COASTGUARD

Eligibility (choose one)

- ☐ WW II ☐ Afghanistan ☐ Combat Action Ribbon ☐ SSBN
☐ Korean War ☐ Iraq ☐ Expeditionary Medal ☐ Imminent Danger/
☐ Vietnam ☐ Korean Service (7/1/49 to present) ☐ Occupation Medal Hostile Fire Pay
☐ Persian Gulf War ☐ Kosovo ☐ Other: _____

Enlistment Date: _____ Discharge date: _____ Service Location: _____
mm/yy mm/yy

Name of Campaign Ribbon or Medal: _____

MEMBERSHIP TYPE (choose one)

- ☐ Two Years \$90.00 ☐ Life (one -time fee) ☐ Life (11 Month Payment Plan)

Post
12101

Payment Plan Terms & Conditions

The VFW Life Membership installment plan allows any VFW member / applicant to purchase a Life Membership by making an initial payment of \$45.00 and 11 monthly payments. The member will be issued an annual membership card and can elect, upon receipt of the first monthly invoice to pay by check, credit card, or ACH Debit. The applicable Life Membership fee is to be determined from the schedule, using the applicant's age on December 31 of the installment plan year in which this Agreement Form is submitted, regardless of the actual date of birth. A permanent Life Membership card will be issued upon completion of this agreement. No refund of any portion of current year annual dues will be made.

AGE as of DECEMBER 31ST	Life Membership Fee Schedule			
	One Time Payment	Initial Payment	11 Month Payment Plan	One Payment Discounted Life Membership
Through Age 30	\$425.00	\$45.00	\$38.64	\$200.00
31-40	\$440.00	\$45.00	\$37.27	\$200.00
41-50	\$375.00	\$45.00	\$34.09	\$170.00
51-60	\$335.00	\$45.00	\$30.45	\$170.00
61-70	\$290.00	\$45.00	\$26.36	\$145.00
71-80	\$225.00	\$45.00	\$20.45	\$115.00
81 and over	\$170.00	\$45.00	\$15.45	\$85.00

PAYMENT INFORMATION

- ☐ Zelle ☐ Check/Money Order ☐ Master Card ☐ Visa ☐ Discover ☐ American Express

702-465-9121

Made Out to
VFW Post 12101

Card Number: _____ CVV: _____

Expiration Date: _____

Card Holders Name: _____

*Amount enclosed or to be charged: \$ _____

*If using Life Membership Payment Plan, an initial payment of \$45.00 is required.

VERIFICATION & SIGNATURE

ATTESTATION OF ELIGIBILITY Yes! I attest by forwarding this application that I have checked the membership eligibility requirements for the Veterans of Foreign Wars of the United States and find that I am eligible for membership in the VFW and that I have never been discharged under other than honorable conditions or I am still serving honorably in the armed forces of the United States of America. I further give authority to the Veterans of Foreign Wars of the United States to verify my entitlement to membership.

Signature of Applicant: _____ Date: _____

Mail Form To: Jerry Peterson, 1937 Williamsport St., Henderson, NV 89052

Questions? Call 702-465-9121

E-mail: TQMguru@hotmail.com

(VFW member # 1035446)