VFW MEMBERSHIP APPLICATION

Name _____ email _____ Gender (M) (F)
First Middle Last (Suffix - Sr., Sr., etc.)

Address _____ Home of Record _____
Address Address

City State Zip City State Zip

Date of Birth _____ Phone _____ SSN (Optional) _____

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

Current Status: ☐ Veteran ☐ National Guard/ Reserve ☐ Active Duty

Qualifying Service

- ☐ Pre-World War II
- ☐ World War II
- ☐ Post-WWII Occupation 1945 - 55 (Europe, Korea, Japan)
- ☐ Post-WWII Occupation 1945 - 90 (Berlin)
- ☐ Korean Service 1950 - 54
- ☐ Korea Defense Service 1955 -
- ☐ Vietnam 1958 - 75
- ☐ Expeditionary Operations 1958 -
- ☐ Desert Shield/Storm 1990 - 1995
- ☐ Bosnia/Kosovo 1995 -
- ☐ Global War on Terrorism - EXPEDITIONARY 2001 -
- ☐ Afghanistan 2001 -
- ☐ Iraq 2003 -

Qualified Recipient Of: ☐ Imminent Danger/Hostile Fire Pay* (Where)_____ ☐ SSBN Nuclear Deterrent Patrol* _____

*Period Covered: _____ (Required for applicants with no other reported qualifying service).

☐ New Post No. _____ ☐ Reinstate ID# _____ ☐ Annual ☐ Life ☐ Life 12 Mo Installment

☐ Transfer From Post No. _____ To Post No. _____

Recruiter (Please Print) _____ Recruiter Card No. _____

Quartermaster _____ Transfer complies with Sec. 107 Date _____ 05/10
Signature

(NATIONAL COPY - SUBMIT WITH TRANSMITTAL FORM)
I want to pay my membership fee by credit card.

☐ MASTERCARD ☐ VISA ☐ DISCOVER ☐ AMEX

CARD NO.

Exp. Date ___/___ $ _____

Signature: _____