

Mail to:
AMVETS Post 79
AMVETS LADIES AUXILIARY
PO Box 93
Waverly, IA 50677

Application for Membership
Auxiliary membership

Auxiliary No. #79 Waverly, Iowa Date _____

Name _____ Date of Birth _____

Street Address _____ Phone _____

E Mail Address _____

City _____ State _____ Zip Code _____

Name of AMVET Relative: _____ Living: ___yes ___no

Relationship: ___ Mother ___ Wife ___ Widow ___ Sister ___ Daughter ___ Step-daughter
___ Granddaughter ___ Grandmother ___ Female Veteran

Introduced by Auxiliary Member _____

(Verified by AMVETS Ladies Membership Chairman) _____

Please enclose a check for \$25.00 payable to AMVETS Ladies Auxiliary, Post 79

Applicant (Signature) _____ Date _____

Accepted: _____ Date _____

(Auxiliary Secretary or other authorized officer)

AMVETS LADIES AUXILIARY POST 79, WAVERLY, IA.

TEMPORARY CARD

_____ is hereby considered a member in good standing for
the membership year of _____.

Auxiliary President _____ Date _____

Post 79 AMVETS – form Auxiliary 10-11-2019