

PERSONAL INFORMATION SHEET

Please Print Legibly

Name: _____ District#: _____ Post #: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: (____) _____ Mobile Phone: (____) _____

E-Mail: _____

Driver's License #: _____ Social Security #: _____

Date of Birth: _____ Spouse's Name: _____

MILITARY EXPERIENCE

Branch of Service: _____ From: _____ To: _____ Highest Rank: _____

Foreign Service was in: _____

VFW EXPERIENCE

VFW Membership #: _____ Member Type: _____

Year first Joined VFW: _____ Cootie Member: _____ Motorcycle Member: _____

I have held the following positions:

Post: _____

District: _____

State: _____

National: _____

Name & Location of local newspaper: _____

VFW Cap Size: _____ Shirt Size: _____ Jacket Size: _____

(S,M,L,XL,2XL,3XL)

(S,M,L,XL,2XL,3XL)