



AMVETS Ladies Auxiliary Honorary Member Form

Date: _____

Department: _____

Auxiliary # _____

City: _____

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Amount Included \$ _____
(\$1.50)

Send Card To: _____

Address: _____

City: _____

State: _____

Zip: _____

INSTRUCTIONS:

- 1) Fill out Honorary Member Form completely.
- 2) Make check in the amount of **\$1.50** payable to the Department not National Headquarters. (Except non-chartered departments.)
- 3) Send two (2) copies of the form to the department secretary with the check.

All checks sent to Headquarters must be accompanied by a Transmittal Form.