

**Veterans of Foreign Wars Motorcycle Group  
VFW Post 8760 Beaufort, SC  
Membership Application**

**VFW Member** \_\_\_\_\_ **Auxiliary Member** \_\_\_\_\_ **Supporter** \_\_\_\_\_

**Personal Information:**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Road Name:** \_\_\_\_\_

**If a Supporter (Sponsor/Mentor) Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State & Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

**Spouse Name:** \_\_\_\_\_

**Service Information:**

**Branch Served In:** Army \_\_\_\_\_ Navy \_\_\_\_\_ Marines \_\_\_\_\_ Air Force \_\_\_\_\_ Coast  
Guard \_\_\_\_\_

**Overseas Service: Location:** \_\_\_\_\_

**Years:** \_\_\_\_\_

**Are You? Retired:** \_\_\_\_\_ **Honorably Discharged:** \_\_\_\_\_ **Active Duty** \_\_\_\_\_

**VFW Information:** (Circle One) (Check One)

**VFW Membership #** \_\_\_\_\_ **Ladies/Men's Aux Membership #** \_\_\_\_\_ **Y**  
**N**

**Post or Auxiliary: Location** \_\_\_\_\_ **#** \_\_\_\_\_ **District #** \_\_\_\_\_

**Motorcycle Information:**

**Do You Have an M Endorsement on Drivers License? Yes \_\_\_\_\_ No \_\_\_\_\_**

**What bike do you ride? Model: \_\_\_\_\_ Year: \_\_\_\_\_  
CI/CC: \_\_\_\_\_**

**How long have you been riding? Solo: \_\_\_\_\_ Groups: \_\_\_\_\_ AMA Member: Y\_\_ N\_\_  
# \_\_\_\_\_**

**Do you wear any other patch at this time? Y \_\_\_\_\_ N \_\_\_\_\_ What Group:  
What Group \_\_\_\_\_**

**In Your Own Words:**

**Why I want to join the Veterans of Foreign Wars Motorcycle Group:**

\_\_\_\_\_

\_\_\_\_\_

**What the Veterans of Foreign Wars means to me:**

\_\_\_\_\_

\_\_\_\_\_

**By joining the VFWRG you consent to become a more active member in your this Post**

One Time VFW Members Application Fee \$25.00

One Time Auxiliary Member Application Fee \$25.00

One Time Supporter Application Fee \$25.00

Patch Fee + 100 Post Community Service Hours \$50.00

I have read and agree to abide by VFW Motorcycle Group By-Laws have received a copy.

Signature : \_\_\_\_\_

Date : \_\_\_\_\_.