

APPLICATION FOR MEMBERSHIP



The LADIES' AUXILIARY of the
ARMY, NAVY & AIR FORCE VETERANS IN CANADA

_____ Auxiliary No. _____

Date _____ 20 _____

To the Ladies' Auxiliary of The Army, Navy & Air Force Veterans in Canada:

I hereby make application for membership in your Auxiliary and agree, if accepted, to abide by its Constitutions, Rules and By-Laws.

(Name in Full)

(Address)

(City) _____ (Prov) _____ (Postal Code)

(Phone) _____ (E-mail address)

(Next of Kin) _____ (Phone)

Have you ever been suspended or expelled from any Veterans Associations? If yes, explain _____

(Applicant's Signature)

Proposed by: _____ Seconded by: _____

Recommended for Acceptance _____ 20 _____

(Chairperson of Membership Committee)

To be filled in by Secretary

Date Received _____ 20 _____ Receipt Issued _____