

TEMPORARY RECEIPT

**FRIENDS OF DONALD M. SQUIER POST 3943
VETERANS OF FOREIGN WARS**

Date _____
Received from _____ \$ _____

*Application for Membership in the
Friends of Donald M. Squier Post 3943*

City & State _____

CASH CHECK VISA MASTERCARD DISCOVER

**FRIEND OF
DONALD M. SQUIER POST 3943
VETERANS OF FOREIGN WARS OF THE UNITED STATES**

MEMBERSHIP APPLICATION

Name _____ No. _____
(Type or Print) Last First Initial

Present Address _____
Street & No. City State Zip

Date of Birth _____ Home Ph. _____ Bus. Ph. _____

I hereby apply for Membership in the Friends of Donald M. Squier Post 3943 Veterans of Foreign Wars

_____ Date

_____ Signature of Applicant

OBLIGATION

In the presence of Almighty God, I do, of my own free will and accord, solemnly promise and declare that:

I will bear true allegiance - to the Constitution of the United States of America - and I will always be loyal thereto.

I do further solemnly promise and declare - that I will comply with the By-Laws and Ritual of this order - and I will always be loyal thereto - that I will never wrong or defraud this organization - nor a member thereof - nor permit any wrong to be done to either - if in my power to prevent it.

I will never propose for membership - any person not eligible - nor one whom I know to be unworthy.

I will never make known to anyone - not authorized to receive it - any of the work of this order.

Should my affiliation - with The Friends of Donald M. Squier Post 3943 - V.F.W. - cease in any way - I will consider this pledge - as binding outside of the order - as though I had remained a member of same.

All this I promise and pledge - upon the honor of a citizen of our great republic.

Signed _____ Applicant

I have investigated the character of the applicant and hereby endorse him / her as eligible and worthy of membership in the Friends of Donald M. Squier Post 3943 - V.F.W.

Signed _____ Date _____

Friends of Donald M. Squier Post 3943 - V.F.W.

CERTIFICATION

Admission Fee paid \$ _____ Dues Paid \$ _____

Date _____, _____ LM Fee Paid \$ _____

(See Sec. 104 By-Laws)

The Investigating Committee has performed its duties and recommends Election Rejection.

(Signatures of Committee Below)

Committee Member

Committee Member

Committee Member

Applicant Elected _____ Date _____ Obligated _____ Date _____