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Friends of Veterans

Membership form

**MEMBERSHIP FORM – Turn into *Friends of Veterans* member or the bartender at the Rosemount VFW Post 9433 along with $5 (cash or check) for the annual dues.**

***Please print clearly.***

|  |  |
| --- | --- |
| **First Name** |  |
| **Last Name** |  |
| **Address (Line 1)** |  |
| **Address (Line 2)** |  |
| **City** |  |
| **State** |  |
| **Postal Code** |  |
| **Country** |  |
| **Telephone Number** |  |
| **Email Address** |  |
| **Military Affiliation (optional)** | (*Military affiliation is not required to be a member*)**Air Force Army Coast Guard Marine Corps. Navy****None** |

**Make checks payable to: *Friends of Veterans***

**Friends of Veterans**

**2625 – 120th Street West**

**Rosemount, MN  55068**

***Thank you for your support!***