

Member Paid \$ _____
 Ck # _____ Cash _____
 Date Rec. _____
 Date Order Mailed _____
 Date Order Rec. _____
For unit office use only
Ordering Unit Office



For state office use only
VFWMG Membership #

Veterans of Foreign Wars
Motorcycle Group of Texas Unit # _____
Vest Order Form

Personal Information:

Date: _____

Name: _____
 Address: _____
 City, State & Zip: _____
 Contact Phone(s): _____
 E-Mail Address: _____

Vest & Patch Information:

Patch Kit: (Check) _____ Yes _____ No (Patches only to put on your Vest)
 Type (Check): Leather _____ Heavy _____ Light _____ Jean _____ Gun Pocket – Yes _____ No _____
 (Gun Pocket Not Avail In B & T)
 Vest Size (Circle One): XSM – SM – MED – LG – XL - 2XL - 3XL - 4XL - 5XL - B&T/Size 48-60 _____
 VFW Membership: (Circle One): Post - Auxiliary: Location: _____ Post: # _____
 Life Member-VFW/Aux: Yes _____ No _____ VFWMG Life Member: Yes _____ No _____
 VFWMG Unit # _____ MG Office Held: _____ Name/Road Name: _____
 Eligible for front Unit Charter Member Patch (Aux & Support Only): Yes _____ No _____
 Bottom Ribbon Membership Type (Circle the One That Applies):
 Charter Member Unit # Member VFW Support Member Auxiliary

Extras:

Campaign Vest Extender (\$10 each) (Circle All Wanted):

Vietnam Desert Storm Iraqi Afghanistan Patriotic Cancer

Unit Member: Return to your Unit Officer; this form along with the Patch Kit fee of \$135.00, Vest fee of \$155.00 for XS – 5XL, or Vest fee of \$175.00 for Big & Tall 48-60 or Gun Vest, plus Extender fee of \$10.00 for each one if you ordered any. Make your check payable to: Your Unit of the VFWMG

Unit Chairman: Send Vest order form and check from your VFWMG Unit or Post account **ONLY.**

No orders or personal checks will be accepted from individual members.

Make Check Payable to: VFWMG Unit 1-12024 - No Personal Checks!

Mail or scan and E-mail by the 15th of the month to:

Paid \$ _____
 Date _____
 Ck # _____
 Date Rec. _____
For state office use only
Order received information

VFWMG Unit 1-12024
Judy Brawner – Vest Processor
P.O. Box 1650 Willis, Texas 77378-1650
Phone: 936-344-2999
Email: vfwnorm@consolidated.net

Date _____
 Ordered _____
 Date _____
 Mailed _____
For state office use only
Order shipping information