



Veterans Club Solivita Auxiliary

VCSA Membership Form

Membership Criteria:

Must be a Resident of Solivita and the Spouse, Widow, Widower, or Partner of a Veteran who served honorably from any branch of the United States Military or its Allied Forces and have a desire to support the Veterans Club of Solivita.

Date submitted: _____	
Name	
Address	
Email	Cell Phone
Your Month & Day of Birth	Are you a snowbird? ☐ Yes ☐ No
Choose how can you participate in the one or more of the teams listed below?	
☐ Membership & Welcome & Hospitality	☐ Social – Planning activities for VCSA + VCS
☐ Fundraising (50/50)	☐ Sunshine / Outreach
☐ History (Photographer, Reflections Article writer)	☐ Meeting Note-Taker
NEW Members will receive a COMPLIMENTARY Lavender polo shirt to be worn at meetings.	
☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ 2X Large ☐ 3X Large ☐ 4X Large	
VCSA complete Uniform: PURPLE cap, PURPLE Polo, Black Pants-LONG, Black Jacket, Black shoes (enclosed feet) (Order form will be provided to order VCSA-Logo items)	
Military Connection: AIR FORCE ARMY MARINE NAVY COAST GUARD SPACE FORCE	
Name	VCS Club Member ☐ Yes ☐ No
If needed (sickness, other VCSA related correspondence only), Can your information be shared with the membership? YES NO	

For more information email vcsauxiliary@gmail.com