

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



VFWMG Membership #

Veterans of Foreign Wars Motorcycle Group of Texas Vest Order Form

Unit # _____

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 (Check the One That Applies):

- Charter Member
- Unit # Member
- VFW Support Member
- Auxiliary

Unit Member: Return this form to your Unit Officer with details and money payable to your Post .

- Pricing:**
- Patch Kit (for your vest) \$135.00
 - Patch Kit and Vest \$155.00 for XS – 5XL
 - Patch Kit and Vest \$175.00 for Big & Tall 48-60 or Gun Vest

Unit Chairman: Send Vest order form and check from your VFW account **ONLY**

No orders or personal checks will be accepted from individual members.
Make Check Payable to: VFWMG Unit 1-12024 - No Personal Checks!

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

Mail order and Check to:
Michele Anderson - VFWMGTX Secretary
2008 Lakefront Dr Harker Heights, TX 76548
Phone: 651-233-8365
Email: vfwmgtxsec@gmail.com

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