

POST JUNIOR VICE-COMMANER INFORMATION:

Name:	Membership ID #:	Home Phone Number	Cell Phone Number:
Street Address:		City & State:	Zip:

POST JUNIOR VICE-COMMANER INFORMATION:

Name:	Membership ID #:	Home Phone Number	Cell Phone Number:
Street Address:		City & State:	Zip:

POST JUDGE ADVOCATE INFORMATION:

Name:	Membership ID #:	Home Phone Number	Cell Phone Number:
Street Address:		City & State:	Zip:

POST CHAPLAIN INFORMATION:

Name:	Membership ID #:	Home Phone Number	Cell Phone Number:
Street Address:		City & State:	Zip:

POST SERVICE OFFICER INFORMATION:

Name:	Membership ID #:	Home Phone Number	Cell Phone Number:
Street Address:		City & State:	Zip:

POST HISORIAN INFORMATION:

Name:	Membership ID #:	Home Phone Number	Cell Phone Number:
Street Address:		City & State:	Zip:

POST SERGEANT-AT-ARMS INFORMATION:

Name:	Membership ID #:	Home Phone Number	Cell Phone Number:
Street Address:		City & State:	Zip:

Regular Post Meeting Night(s):

Time:

Annual Dues:

Does Post Have a Post Home?

Own:

Rent:

Exact Location of Post (Post Address):

Post Phone Number:

Street Address:	City & State:	Zip:
-----------------	---------------	------

EACH POST IS REQUIRED TO PAY **\$15.00 BOND FEE**. YOU MUST SUBMIT THIS FEE WITH THIS CERTIFICATION OF OFFICERS IN ORDER TO RECEIVE THE **POST MEMBERSHIP CARDS**.

BOND: \$ 15.00

CHECK #:

POST email address:

Signed: _____

Date: _____

Post Commander or Post Adjutant