

**MEMBERSHIP PROGRAM**

**Lisa Raplee**

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Year-end report may be USPS or emailed.  
Deadline MUST be received by April 1, 2024

Auxiliary \_\_\_\_\_ District \_\_\_\_\_

Did your Auxiliary utilized any of the Membership material/resources available on the National VFW Auxiliary Malta website YES \_\_\_\_\_ NO \_\_\_\_\_.

Did your Auxiliary promote, participate, host or co-host with their VFW post a membership recruitment. YES \_\_\_\_\_ NO \_\_\_\_\_.

Did you Auxiliary educate your members on the benefits of their Membership?  
Example: insurance plans, travel benefits, cancer grants, hearing plans, etc. YES \_\_\_ NO \_\_\_

Did your Auxiliary educate your members on the National Membership Program Awards  
YES \_\_\_ NO \_\_\_

Number of Members who recruited at least one new member \_\_\_\_\_

How did your Auxiliary promote Membership during the year?  
TV \_\_\_\_\_ RADIO \_\_\_\_\_ NEWSPAPER \_\_\_\_\_ SOCIAL MEDIA \_\_\_\_\_ FLYERS \_\_\_\_\_

Date your Auxiliary attained 85% \_\_\_\_\_ 95% \_\_\_\_\_ 100% \_\_\_\_\_

Number of Annual members who converted to LIFE MEMBER \_\_\_\_\_

Number of REJOIN MEMBERS \_\_\_\_\_ Number new LIFE MEMBERS \_\_\_\_\_

Date you held MEMBERSHIP DRIVE \_\_\_\_\_ Number of Members signed up \_\_\_\_\_

Auxiliary Name \_\_\_\_\_ Auxiliary President \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

Auxiliary Chairman \_\_\_\_\_ Telephone \_\_\_\_\_

**"Banding Together for Our Veterans" as we "Light the Flame of Hope for Our Veterans."**