



VFW AUXILIARY DEPARTMENT OF NEW YORK AUXILIARY / OFFICER / MEMBER CHANGE FORM

AUXILIARY No. _____ DISTRICT No. _____ CURRENT DATE: _____

A. INDICATE AUXILIARY INFORMATION THAT IS TO BE UPDATED (CHECK ALL THAT APPLY)

☐	CHANGE OF MEETING PLACE:	_____	_____
		Previous Meeting Place	New Meeting Place
☐	CHANGE OF MEETING DAY/TIME:	_____	_____
		Previous Meeting Day/Time	New Meeting Day/Time
☐	CHANGE OF ANNUAL DUES:	Previous Dues Amount \$: _____	New Dues Amount \$: _____
☐	CHANGE OF OFFICER:	_____	_____
		Indicate Office	Name of Previous Officer Name of New Officer

NOTE: New Treasurer Must File IRS Form 8822 B Within 60 Days.

B. INDICATE MEMBER INFORMATION THAT IS TO BE UPDATED (CHECK ALL THAT APPLY)

☐	CHANGE OF NAME:	Former First Name: _____	New First Name: _____
		Former Last Name: _____	New Last Name: _____
☐	CHANGE OF ADDRESS	☐	CHANGE OF TELEPHONE NO.
		☐	CHANGE OF EMAIL ADDRESS
		☐	DEATH OF MEMBER
			DATE OF DEATH _____

COMPLETE THE FOLLOWING INFORMATION FOR MEMBER / NEW OFFICER BEING UPDATED:

MEMBER'S NAME: _____ MEMBERSHIP ID No. _____

CURRENT ADDRESS: _____

EMAIL ADDRESS: _____

PHONE No. HOME: _____ CELL: _____

C. MEMBERSHIP CARD REPLACEMENT (LIFE MEMBERS ONLY):

Replacement card fees: LIFE MEMBER - \$10. Cards can be replaced in any of the following manners:

1. Member can order their own replacement card thru their MALTA account. Paper cards can also be downloaded from MALTA.
2. Auxiliary Treasurers can purchase replacement cards on members behalf.
3. Member can send request and applicable fee to the Department Treasurer. Make check payable to 'VFW Auxiliary Department of NY', earmarked 'Replacement Card'.

To Process Changes - SEND COMPLETED FORM TO:

DEPARTMENT SECRETARY Amber Sullivan
2 Donna Lane ~ Binghamton, NY 13903
 EMAIL: amber.vfwa@gmail.com ~ TELEPHONE: (607) 245-6106