



INSTITUTED
DECEMBER 27, 1894

APPLICATION and
PROOF of ELIGIBILITY for MEMBERSHIP
in the

Form No. 103B

**MILITARY ORDER OF FOREIGN WARS
OF THE UNITED STATES**

_____ COMMANDERY

DATE: _____

To: *Members of the Council of the*

MILITARY ORDER OF FOREIGN WARS OF THE UNITED STATES

_____ COMMANDERY

I, _____, hereby tender proof for eligibility for VETERAN MEMBERSHIP in this Order, by right of active service as a veteran Commissioned Officer in or during the conflict of _____ from _____ to _____ or for HEREDITARY MEMBERSHIP as a direct lineal descendant from _____ who was born on _____ and died on _____ and served from _____ to _____ Rank and Branch _____ in the conflict of _____.

My Birthplace: _____ Birth date: _____

I am a citizen of _____

I declare upon honor and subject to perjury penalties, that with respect to the conflict designated above and on the reverse: (a) as a Candidate for Veteran Membership performed active service as a Commissioned Officer in or during that conflict; I was awarded the cited decoration(s); if no longer in service, I was honorably discharged; or (b) as a Candidate for Hereditary Membership I am the lineal descendant of the cited ancestor who served as a Commissioned Officer in that conflict and was awarded the cited decorations. I further declare on honor that, if elected to the Membership of this Order, I will endeavor to promote the purposes of its Institution, and will observe and comply with its Constitution and By-Laws, and its Regulations concerning its distinctive Badge of Insignia, and that I will support the Constitution of the United States.

| | |
|---|-----------------------------|
| Supporting Documents | |
| <input type="checkbox"/> | DD214 attached |
| <input type="checkbox"/> | Active duty record attached |
| Please contact the Registrar-General for annual dues and mailing instructions. | |
| Registrar@mofwus.org | |

Signature of Candidate _____

(if applicable) Rank and Branch of Service _____

Mailing Address _____

_____ Telephone/Mobile: _____

E-mail address: _____

Occupation: _____

We, the undersigned members, approve and recommend the foregoing Candidate for Membership in the Military Order of Foreign Wars of the United States. We accept, on his/her word, with respect to the conflicts designated on the reverse, that to the best of our knowledge and belief (a) as a Candidate for Veteran Membership, he/she served as a Commissioned Officer in or during that conflict, or (b) as a Candidate for Hereditary Membership, he/she is a descendent of an ancestor who served as a Commissioned Officer in that conflict. We know him/her to be worthy and will, if admitted, be a desirable Member.

Proposer: _____ Seconder: _____

Examined and approved (date) _____ By _____

The within named Candidate admitted by the Council (date) _____

Secretary of the _____ Commandery,
Military Order of Foreign Wars of the United States

My services or those of my ancestor (the latter applicable to Applications for Hereditary Membership) in the Wars comprehended in the institution of the Military Order of Foreign Wars of the United States upon which my eligibility to Membership is based were as follows:

[NOTE: Here in support of your Application or for historian interest you may write rank or ranks held on active federal service in the Army, Navy, Marine Corps, Air Force, or Coast Guard, or of any component thereof. Cite all military medals, insignia, ribbons and other decorations you are entitled to wear. Give unit or ship, and give distinct description of the nature of service, with details as to battles, campaigns, or camp, garrison, or other duty. Mention where services are recorded, whether in appropriate Department of Defense Agencies or Department of Homeland Security or in the Office of the Adjutant General of what State, or elsewhere. Give dates of graduation from service academies or colleges or universities. Give dates of entry on active duty, dates of commissions; and date of final discharge or separation from active duty. Applications for Hereditary Membership should show lineage from ancestor. Photocopies of documentation of above are desirable for historical purposes.]

ADDITIONAL FACTS

Incidents connected with the Applicant's life and public services, parentage, date of marriage, husband's/wife's parentage or ancestry, names of children and dates of birth, names of immigrant ancestors, date of arrival and place of settlement in America, family history or traditions, - any details likely to prove of interest to the Historian of the Order, or to the applicant's posterity, may be written here.