



AMVETS LADIES AUXILIARY
3309-11 Hubbard Road,
Hyattsville, MD 20785
Phone 301-459-6255
Fax 301-683-3081 or 3083

REPLACEMENT LIFE MEMBER CARD FORM

Date: _____

Department: _____ Auxiliary: _____ Location/City: _____

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Membership ID#: _____

SEND CARD TO:

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

INSTRUCTIONS:

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1. Fill out the Replacement Life Member form completely.
 2. Include Member's ID#.
 3. The cost of the replacement card is **\$15.00**. Make check payable to your Department not National (except in non-Department states). Send two (2) copies of this form to the Department Membership Processing individual with a check.
 4. If you are individual requesting a replacement card, make check payable to AMVETS National Ladies Auxiliary.
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