

AUTHORIZATION REQUEST

TO: QUARTERMASTER GENERAL, NATIONAL HEADQUARTERS DATE:	
I request written permission to use the following emblem and/o	or name exclusively for the purpose listed below:
☐ 'Veterans of Foreign Wars of the United States' Name ☐ 'Veterans of Foreign Wars, U.S.' Name ☐ 'VFW' Acronym ☐ Other:	☐ 'Veterans of Foreign Wars of the U.S.' Name ☐ 'Veterans of Foreign Wars' Name ☐ VFW Cross of Malta
Reason for Use:	
When:	
Where:	
File Format (jpg, tif, pdf): Color Version (1 color, 2 color, full color):	
I understand that any use of the VFW Emblem and/or VFW nar Quartermaster General of the Veterans of Foreign Wars of the Emblem and VFW name are the exclusive rights of the Veteran unauthorized use is a violation of federal law. I understand tha subject to revocation at any time.	United States. I understand that the use of the VFW as of Foreign Wars of the United States and any
Signature	
Printed Name & Title	
☐ Post ☐ County Council ☐ District ☐ Departmen	t
Street Address	City, State & Zip
Phone #	Fax #

Please return completed form to:

E-mail Address

Quartermaster General VFW National Headquarters 406 West 34th Street, 11th Floor Kansas City, MO 64111 E-mail: qmgeneral@vfw.org

Fax: (816) 968-1189