



AUTHORIZATION REQUEST

TO: QUARTERMASTER GENERAL, NATIONAL HEADQUARTERS DATE: _____
VETERANS OF FOREIGN WARS OF THE UNITED STATES

I request written permission to use the following emblem and/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 name requires prior written permission from the Quartermaster General of the Veterans of Foreign Wars of the United States. I understand that the use of the VFW Emblem and VFW name are the exclusive rights of the Veterans of Foreign Wars of the United States and any unauthorized use is a violation of federal law. I understand that the authorization, if given, may not be transferred and is subject to revocation at any time.

Signature

Printed Name & Title

- Post County Council District Department Conference Other: _____

Street Address

City, State & Zip

Phone #

Fax #

E-mail Address

Please return completed form to:
Quartermaster General
VFW National Headquarters
406 West 34th Street, 11th Floor
Kansas City, MO 64111
E-mail: qmgeneral@vfw.org
Fax: (816) 968-1189