

ALL STATE ENTRY FORM

(Deadline for submission is April 1st)

**EVERY TIME THE COMMANDER AND/OR QUARTERMASTER CHANGE
THIS FORM MUST BE UPDATED TO ENSURE CORRECT INFORMATION
FOR ALL STATE JUDGING.**

COMMANDER'S INFORMATION;

DISTRICT _____

Post # _____ Post Name _____

Post Address _____

Commander's Name _____

DO NOT USE NICKNAMES

Commander's Address _____

City _____ FL Zip Code _____

Phone # _____ E-mail _____

Hat size _____ Life Member Yes ___ No ___ Shirt Size _____

QUARTERMASTER'S INFORMATION;

Post # _____ Post Name _____

Post Address _____

Quartermaster's Name _____

DO NOT USE NICKNAMES

Quartermaster's Address _____

City _____ FL Zip Code _____

Phone # _____ E-mail _____

Hat size _____ Life Member, Yes ___ No ___ Shirt Size _____

**POST MUST HAVE A BEGINNING TOTAL OF 50 MEMBERS
TO QUALIFY FOR ALL STATE**

Mail Completed Form To:
VFW Department Headquarters
543 NE Sanchez Avenue, Ocala, FL 34470
"or" FAX TO: 352/622-3869 "or" Email To: statehq@vfwfl.org