



CWVA

Catholic War Veterans Auxiliary

**CATHOLIC WAR
VETERANS AUXILIARY
PO BOX 5356
ASTORIA, NY 11105
TELEPHONE 1-703-549-3622**

September 2017

PLEASE GIVE TO YOUR SECOND VICE PRESIDENT

TO: Second Vice Presidents, **ALL** Echelons

FROM: Regina Bilodeau National Second Vice President
21 Quincy St. Manchester, NH 03102

SUBJECT: 2017-2018 National Second Vice President Program

Increasing membership will be the goal of the Second Vice President's Program for 2017-2018 Remember, there are many membership possibilities in one family. Always carry a membership application with you. **Encourage your members to renew their membership early so that your Unit can receive a National Citation for 100% memberships as of December 31, 2017.**

We will continue the new member incentive program (Unit-level only). For every five (5) new members recruited, a \$10.00 check will be issued to the individual who signs up the five new members. The Department Second Vice President should encourage the Unit Second Vice President to set up a membership program.

AWARDS

UNITS

The Unit with the largest numerical increase of new members will receive a \$25 check and a National Citation.

The Unit with the second-largest numerical increase of new members will receive a \$10 check and a National Citation

The Unit selected to have the Best Membership Program will receive a \$25 check and a National Citation. (Program to be explained in detail.)

DEPARTMENTS

The Department Second Vice President who develops the "Most Productive Membership Program" and reports activities on a separate sheet of paper with his/her Convention report will be awarded a \$10 check and National Citation.

REPORTS

Reports are due on June 30, 2018

Remember, our goal this year is an increase in membership. Bring in those new members!

Attachments: Membership Report Form
\$10 Cash Award Application

2017-2018 MEMBERSHIP REPORT FORM

Auxiliary Name and No.: _____

No. of Members: _____ **Department:** _____

Name and Address of Officer: _____

Phone No.: _____ **E-mail:** _____

Membership Totals – October 1, 2017 to June 1, 2018

LIFE	RENEWALS	AUTOMATIC RENEWALS	NEW	TOTAL

Member sponsoring the most new members:

Name: _____ **No. of Members:** _____

Deceased Members (July 1, 2017 to June 30, 2018): Please put date of death:

Special Membership Project:

THROUGH ECHELONS: from UNIT (to CHAPTER, if any), to DEPARTMENT, to
NATIONAL AUXILIARY OFFICER; DEADLINE DATE of **JUNE 30, 2017.**

**REGINA BILODEAU – NATIONAL SECOND VICE PRESIDENT
21 QUINCY ST MANCHESTER NH 03102**

**2017-2018 MEMBERSHIP PROGRAMS
\$10.00 CASH AWARD APPLICATION**

In 2017-2018, we will continue the NEW MEMBER INCENTIVE PROGRAM. For every five (5) new members enrolled, a \$10.00 check will be issued to the INDIVIDUAL responsible for signing the new members. This does not include members who have missed paying dues for one or more years.

**MAIL FORM FOR EACH FIVE (5) NEW MEMBERS ENROLLED BY ONE
INDIVIDUAL TO:
CATHOLIC WAR VETERANS AUXILIARY
PO BOX 5356 ASTORIA NY 11105**

Unit Name and No.: _____ **Department:** _____

	New Member Enrolled	Report Number	Line Number
1.			
2.			
3.			
4.			
5.			

MAKE CHECK PAYABLE TO:

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Date: _____

TO BE COMPLETED AT NATIONAL HEADQUARTERS:

Verified by: _____

Check No.: _____ **Amount:** _____ **Date:** _____
