

# VFW Trademark Authorization Request



Date: \_\_\_\_\_

VETERANS OF FOREIGN WARS  
**NO ONE DOES MORE FOR VETERANS.**

## Instructions:

- Departments and Posts are authorized to use the VFW name, logos, or emblems for printed or digital use for VFW activities, such as the creation of brochures for membership drives, Post events and other community outreach efforts, and do not need to submit this form. Current logos for non-commercial use may be obtained from the VFW Communications Department by emailing [Communications@vfw.org](mailto:Communications@vfw.org).
- The VFW STORE and its licensed vendors are the only authorized sources to use the VFW name and Cross of Malta on apparel, caps and other merchandise. Your first line of contact for merchandise is the VFW STORE. The VFW STORE can assist with certain custom items even though they are not in the catalog. Visit the VFW STORE online at [www.vfwstore.org](http://www.vfwstore.org) or call 1-800-821-2606. If the VFW STORE is unable to assist, you may use this form to request authorization to use a third party vendor.
- If requesting items that cannot be produced by the VFW STORE or its Licensed Vendors, complete this form in its entirety and submit to the Quartermaster General's Office prior to production. Please allow ample time to process your request.

I request written permission to use the following emblem and/or name exclusively for the purpose listed below:

- |   |  |
|---|--|
| <input type="checkbox"/> 'Veterans of Foreign Wars of the United States' Name | <input type="checkbox"/> 'Veterans of Foreign Wars of the U.S.' Name |
| <input type="checkbox"/> 'Veterans of Foreign Wars, U.S.' Name                | <input type="checkbox"/> 'Veterans of Foreign Wars' Name             |
| <input type="checkbox"/> 'VFW' Acronym  | <input type="checkbox"/> VFW Cross of Malta                          |
| <input type="checkbox"/> Other: _____   |  |

Item and Reason for Use: \_\_\_\_\_

When: \_\_\_\_\_

Where: \_\_\_\_\_

Quantity: \_\_\_\_\_

Use of Proceeds: \_\_\_\_\_

Color Version (1 color, 2 color, full color): \_\_\_\_\_

File Format (jpg, tif, pdf): \_\_\_\_\_

## VFW Information

\_\_\_\_\_  
Dept/District/Conference/Post

\_\_\_\_\_  
Contact Name and Title

\_\_\_\_\_  
Address, City, State & Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone Number

## Producing Company Information

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Address, City, State & Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone Number

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

### Please return completed form to:

Quartermaster General  
VFW National Headquarters  
406 West 34<sup>th</sup> Street, 11<sup>th</sup> Floor  
Kansas City, MO 64111  
E-mail: [qmgeneral@vfw.org](mailto:qmgeneral@vfw.org)  
Fax: (816) 968-1189

<b>Office Use Only</b>	Approved?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Date _____
	State _____