



**RED ROSE VETERANS  
HONOR GUARD**  
Lancaster, PA  
Honos Officio Fidelis  
*Honor For Faithful Service*

RRVHG USE ONLY
Date Joined RRVHG (Mo/Yr):

## RRVHG MEMBERSHIP APPLICATION FOR CIVILIAN BUGLERS

[A] Name (Last, First): \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Nickname: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Street: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email 1: \_\_\_\_\_ Email 2: \_\_\_\_\_  
Spouse's Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

The completion of this Membership Application form indicates that you are an adult and willing to create a military presence for the purpose of according Military Honors to deceased, active duty, retired, and honorably discharged veterans when requested and when it is suitable to your schedule of commitments. You agree that when appearing for rendering Military Honors you will wear a civilian uniform prescribed by the RRVHG. You agree to maintain your uniform to ensure that it appears neat and clean. Uniforms that are paid for by the RRVHG become the property of the RRVHG and shall be returned to the RRVHG whenever a member no longer desires to participate in services. You will be required to audition by playing "Taps" or providing a video recording of you playing "Taps." You understand that membership is voluntary and a privilege and is maintained by actively participating in a minimum of six funerals or casket guards per year, training exercises, monthly meetings, and conducting yourself in a professional manner.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail copy of completed form to Membership Chairman, RRVHG, P.O. Box 8601, Lancaster, PA 17604-8601.

**IF COMPLETED ONLINE, SAVE LOCALLY FOR FUTURE USE OR EDITING**