## **Auxiliary Outreach**

I'm excited for the opportunities ahead of us for the 2025 - 2026 program year! As Madame President reminds us, we are "Forever Serving Veterans". We do this by carrying on their dedication and serving our communities. Essentially, Auxiliary Outreach is volunteering with another fraternal organization (American Legion, Elks, Knights of Columbus, etc) or community group (police/fire department, library, animal shelter, soup kitchen, park, etc). Let's review some examples taken directly from MALTA:

- Participation in walks that benefit other organizations as an event spotter, water station volunteer, timekeeper, etc. (Walking or running in the race is not part of Auxiliary Outreach.)
- Working with local police on child ID kits.
- Working with firefighters on fire safety and prevention.
- Working with EMTs to host CPR training.
- Handing out food at soup kitchens.
- Partnering with an animal shelter to hold a spay and neuter clinic.
- Partner with a local community theatre to provide the house volunteers (ushers, concessions, etc.) for one weekend of performances.
- Working with parks and recreation departments to plant trees, adopt-a-park initiatives and develop community art installations.
- \* Don't forget; you must be identifiable as a VFWA member during the activity. Please wear an VFW Auxiliary shirt, hat, pin, etc.
- \* Auxiliary Outreach must be approved at an Auxiliary meeting and recorded in the meeting minutes before the project. I've developed a sheet for members to fill out after they complete their outreach activity. It will assist you in tallies for your year end report.

This year, I'd like to feature a different NJ organization each month that our members can learn about and work with. If you or your Auxiliary already work with one or participate at a great event, please tell me about it! Email, text, or phone me and tell me.  $\Box$ 

Yours in Service,

Kathleen Shanahan NJ VFWA Aux Outreach 25/26 shanahank2@gmail.com 201-410-6814

Monthly Auxiliary Member Report Form
\*Please submit to your Post Auxiliary Outreach Chair or President.

Name:
Organization(s) and date(s) volunteered: Ex. Great Falls Military Food Pantry 7-19-25
Lx. Great Falls Military Food Paritry 7-19-25
Total # of hours:
Brief description of activity