

## The American Legion Membership Application

(Name)

(Phone)

(Mailing Address)

(Date)

(City)

(State)

(Zip)

(Post #)

(Membership ID #... former member)

(Dues)

**Please check appropriate eligibility dates and branch of service below**

- |                                                                                                  |                                                                                |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <input type="checkbox"/> Aug 2, 1990 – cessation of hostilities as determined by U.S. Government | <input type="checkbox"/> U.S. Army                                             |
| <input type="checkbox"/> Dec. 20, 1989 – Jan. 31, 1990                                           | <input type="checkbox"/> U.S. Navy                                             |
| <input type="checkbox"/> Aug. 24, 1982 – July 31, 1984                                           | <input type="checkbox"/> U.S. Air Force                                        |
| <input type="checkbox"/> Feb. 28, 1961 – May 7, 1975                                             | <input type="checkbox"/> U.S. Marines                                          |
| <input type="checkbox"/> June 25, 1950 – Jan. 31, 1955                                           | <input type="checkbox"/> U.S. Coast Guard                                      |
| <input type="checkbox"/> Dec. 7, 1941 – Dec. 31, 1946                                            | <input type="checkbox"/> Merchant Marines 12/7/41 – 8/15/45 (only eligibility) |
| <input type="checkbox"/> April 6, 1917 – Nov 11, 1918                                            |                                                                                |



I certify that I served at least one day of active military duty during the dates marked above and was honorably discharged or am still serving honorably.

30-009

Signature of applicant

Name of recruiter

## Receipt of Dues

(Please Print)

From

\$

for 20 \_\_\_\_\_ Post # \_\_\_\_\_

Recruiter's Name \_\_\_\_\_

Recruiter's Signature \_\_\_\_\_

Recruiter's Phone # \_\_\_\_\_

Listed below are just a few of the many programs The American Legion sponsors. Please check the one(s) that are of interest to you. If the program you like is not listed, please indicate it in the "other" area.

- Volunteer work at VA Hospital.
- Work with youth.
- Help/participate in Post's social activities ... dances, dinners, etc.
- Participate in educational activities ... (essay contests, oratorical contests, scholarships)
- Work with sports teams.
- Supervise groups (drill team, drum & bugle, scouts, etc.).
- Post improvement projects.
- Membership drives.
- Community projects.
- Other: \_\_\_\_\_
- Wife would be interested in the Auxiliary.
- Son would be interested in the Sons of The American Legion.

