## **The American Legion Membership Application**

DATE OF BIRTH

NAME

Format: mm/dd/yyyy - select date by clicking inside box

MAILING ADDRESS

PHONE NO

CITY

STATE

ZIP MALF POST NO.

FMAII

FEMALE

EIVIAIL

**DUES** 

I certify that I served at least one day of active military duty since December 7, 1941 and was honorably discharged or am still serving honorably.

## Please check appropriate service era and branch of service below

Global War on Terror

U.S. Army

Gulf War Panama U.S. Navy

Lebanon/Grenada

U.S. Air Force

Vietnam U.S. Space Force Korea U.S. Coast Guard

WWII

Merchant Marines (WWII only)

Other Conflicts

DATE

SIGNATURE OF APPLICANT

Format: mm/dd/yyyy - select date by clicking inside box

NAME OF RECRUITER

## RECEIPT OF DUE



HERIOTEN SIGNATURE

RECRUITER'S PHONE NO.

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 and
bugle, scouts, etc.).
Post improvement projects.
Membership drives.
Community projects.
Other:
☐ Spouse would be interested in the
American Legion Auxiliary.
☐ Son or grandson would be interested in



the Sons of The American Legion.