

The American Legion Membership Application

_____ (Name) _____ (Phone)

_____ (Mailing Address) _____ (Date)

_____ (City) _____ (State) _____ (Zip) _____ (Post #)

_____ (Membership ID# former member) _____ (Email Address) _____ (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 – 12/31/46 (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.

_____ Signature of applicant _____ Name of recruiter

30-009 (2009)

Receipt of Dues

(Please Print)



From _____ Post # _____
 \$ _____ for 20 _____
 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.



Post Name: _____
 Post Address: _____
 Post Phone #: _____
 Post Web site: _____
 Post e-mail: _____

Please return completed application to:

The American Legion
 Post 322
 320 W. Michigan Ave.
 Saline, MI 48176