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

- ☐ Aug 2, 1990 – cessation of hostilities as determined by U.S. Government
- ☐ Dec. 20,1989 – Jan. 31, 1990
- ☐ Aug. 24, 1982 – July 31, 1984
- ☐ Feb. 28,1961 – May 7, 1975
- ☐ June 25, 1950 – Jan. 31, 1955
- ☐ Dec. 7, 1941 – Dec. 31, 1946
- ☐ April 6, 1917 – Nov 11, 1918
- ☐ U.S. Army
- ☐ U.S. Navy
- ☐ U.S. Air Force
- ☐ U.S. Marines
- ☐ U.S. Coast Guard
- ☐ Merchant Marines 12/7/41 – 12/31/46 (only eligibility)

I certify that I served on active military duty from _____ (day/mo/yr) to _____ (day/mo/yr) during the dates marked above and was honorably discharged or am still serving honorably.

Signature of applicant Name of recruiter

30-009 (2014)

Receipt of Dues

(Please Print)

From _____

$_____ for 20___ Post # _____

Recruiter's Name _____

Recruiter's Signature _____

Recruiter's Phone # _____