The American Legion Membership Application

_____ _____
(Name) (Phone)

_____ _____
(Mailing Address) (Date)

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

Please check the 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 __ U.S. Army
__ Aug 24, 1982 – July 31, 1984 __ U.S. Navy
__ Feb 28, 1961 – May 7, 1975 __ U.S. Air Force
__ June 25, 1950 – Jan 31, 1955 __ U.S. Marines
__ Dec 7, 1941 – Dec 31, 1946 __ U.S. Coast Guard
__ April 6, 1917 – Nov 11, 1918 __ Merchant Marines 12/7/41 – 8/15/45 (only eligibility)

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