

Mount Horeb American Legion New Member Form

Name First_____MI____Last_____

Address_____

City_____State_____Zip_____

Telephone Number_____ Email Address_____

Date of Birth_____

Branch of Service

Army____ Navy____ Marines____ Air Force____ Coast Guard_____

Service Dates_____

Have you every been a member of The American Legion before?

Yes____ No____ If yes do you know your Member Number_____

If you are transferring from another American Legion Post please fill in the post # that you are transferring from.

Please print this form out, fill in your information and either email it back to

Mhamlegionpost113@gmail.com

Or mail it to us at

Mount Horeb American Legion, PO Box 211, Mount Horeb, WI 53572