



THE AMERICAN LEGION – MEMBERSHIP APPLICATION



DUES RECEIPT
(please print)

Name _____
First Initial Last Phone

Address _____
Street City State ZIP

Membership ID# former member Email Post # Date

Please check appropriate eligibility dates and branch of service below:

- Gulf War/War on Terrorism (8/2/90 until cessation of hostilities)
- Panama (12/20/89-1/31/90)
- Lebanon/Grenada (8/24/82-7/31/84)
- Vietnam (2/28/61-5/7/75)
- Korea (6/25/50-1/31/55)
- WWII (12/7/41-12/31/46)
- 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)

Groves-Walker Post 346
31775 Grand River Ave.
Farmington, Michigan 48336-4238
www.AmericanLegionPost346.org
248-478-9174

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.

Signed by applicant _____ Name of recruiter _____

If you are a new member, send this completed application with annual dues to The American Legion, Attn: Membership, P.O. Box 1055, Indianapolis, IN 46206 (check www.legion.org/join for dues amount), or take it to a local post. To locate a post near you, click on "Find a Post" at www.legion.org.

D17010

Date _____

Received from _____

\$ \$50 for 20 _____ dues

Recruiter's name _____

Recruiter's signature _____

Recruiter's phone # _____



AMERICAN LEGION AUXILIARY – MEMBERSHIP APPLICATION



DUES RECEIPT
(please print)

APPLICANT INFORMATION

ELIGIBILITY INFORMATION

Name _____
First Initial Last

Address _____

City _____ State _____ ZIP _____

Home phone _____ Cell phone _____

Email _____
Groves-Walker Unit 346 Farmington, Michigan

Unit # and Location _____

Date of Birth (Required) _____ Birth - 17 Dues: \$5 18 and older Dues: \$20

Have you been a member previously? Yes No

Signature of applicant (or legal guardian if under 18) _____ Date _____

Mail completed application to: American Legion Auxiliary Department of Michigan
212 N. Verlinden Ave. Suite B Lansing, Michigan 48915
Annual dues must accompany completed application.
Membership pending approval of application.

Eligible through / name of veteran (if living, must be American Legion member) _____ Living Deceased

American Legion member ID # _____

Veteran's American Legion post name _____ Post # _____ City _____ State _____

Veteran served: (check all that apply)

- WWI (4/6/17-11/11/18)
- Merchant Marines (12/7/41-12/31/46)
- Vietnam (2/28/61-5/7/75)
- Panama (12/20/89-1/31/90)
- WWII (12/7/41-12/31/46)
- Korea (6/25/50-1/31/55)
- Lebanon/Grenada (8/24/82-7/31/84)
- Gulf War/War on Terrorism (8/2/90 until cessation of hostilities)

Applicant's relationship to the veteran:

- Mother Wife Daughter Sister
- Grandmother Granddaughter Great-granddaughter Self

I certify that the above named individual served at least one day of active duty during the dates marked above and was honorably discharged or is still serving honorably.

Post adjutant/officer membership verification _____ ALA 08/2016 Date _____

Date _____

Received from _____

\$ _____ for 20 _____ dues

Recruiter's name _____

Recruiter's signature _____

Recruiter's phone # _____



SONS OF THE AMERICAN LEGION – MEMBERSHIP APPLICATION



DUES RECEIPT
(please print)

Date _____

Detachment of Michigan Squadron No. Groves-Walker 346 Birth date _____

Name _____ Recruited by _____
First Initial Last Initial Last

Address _____
Street City State ZIP Phone

Veteran through whom eligibility is established _____

(a) Above is a member in good standing of Post No. _____ Department of _____

OR (b) Above is a deceased veteran who served honorably from _____ to _____

(c) Relationship of applicant to veteran _____

Has applicant previously been a member of the SAL? _____ Where? _____

I hereby subscribe to the Constitution of the Sons of The American Legion and apply for membership.

Email _____ Transmit \$ \$25 - Junior (under 18) \$11 for 20 _____ annual membership dues

Signed by applicant (or legal guardian if under 18) _____ Eligibility certified by _____

Mail completed application to Sons of The American Legion department/state headquarters. Annual dues must accompany completed application. Ask local contact for amount due. For current detachment address, go to The American Legion department/state headquarters, or visit www.legion.org.

D17010

Date _____

Received from _____

\$ _____ for 20 _____ dues

Groves-Walker 346
Squadron No.

Michigan
Detachment of