

THE AMERICAN LEGION - MEMBERSHIP APPLICATION

Name	(Fig. A)	(114:-1)	(1 +)	(Data	(Diale)
	(First)	(Initial)	(Last)	(Date of Birth)	
Mailing Address(Street)		(City)	(State)	(ZIP)	
	(Phone)	(Email)	Male Female (Gender)	(Post #)	(Dues)
☐ I certify that	t I served at least one day of active mi	litary duty since December 7, 1941 and	was honorably discharged or am still serving	honorably.	
Please ched Global War Gulf War	ck appropriate eligibility era a on Terror	and branch of service below:			
☐ Panama ☐ Lebanon/Gr	u.S. Air Force renada u.S. Marines				
☐ Vietnam☐ Korea☐ WWII☐ Other Confi	☐ U.S. Coast Guard ☐ Merchant Marines				
Signature of Applicant		Date	Name of Recruiter		



DUES PAID YEARLY

Members - \$35

Please send check or money order with application to the address below.

The American Legion Auxiliary John Ivens Unit #42 P.O. Box 238 Williams, AZ 863023

Thank you and welcome to our Legion Family