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American Legion Auxiliary
APPLICATION FOR MEMBERSHIP

Applicant Information

Name _____
(First) (M.I.) (Last)

Address _____ City _____ State _____ Zip _____

_____

Work Phone _____ Home Phone _____ E-mail _____

Unit Number _____ Location _____

☐ Senior (over 18)
☐ Junior (birth - 18) Date of Birth ____/____/____
(Birth date required for Junior members)

Signature of Applicant (or legal guardian if Junior member) _____ Date _____

Eligibility Information

Name of Veteran Eligible Through _____ Legion Member ID Number _____

American Legion Post _____ Post # _____ City _____ State _____

Veteran: ☐ Living ☐ Deceased

Veteran served in:

☐ WWI *(4/6/17-11/11/18)*
☐ WWII *(12/7/41-12/31/46)*
☐ Merchant Marines *(12/7/41-8/15/45 Only)*
☐ Korea *(6/25/50-1/31/55)*
☐ Vietnam *(2/28/61-5/7/75)*
☐ Grenada/Lebanon *(8/24/82-7/31/84)*
☐ Panama *(12/20/89-1/31/90)*
☐ Persian Gulf War *(8/2/90 until cessation of hostilities as determined by the US Government)*

Applicant's Relationship to the Veteran: *(Step relatives are eligible)*

☐ Mother ☐ Wife ☐ Daughter ☐ Sister ☐ Granddaughter ☐ Great-Granddaughter ☐ Grandmother ☐ 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.

Signature: _____ Date _____
Post Officer Membership Verification (Or Unit Secretary's Verification for Female Veterans Only)

For Veteran's DD214 Discharge Papers go to: http://www.archives.gov/veterans/military-service-records/dd-214.html

I am interested in learning more about the following:

☐ Paid-Up-For-Life Membership
☐ Volunteering at a VA Medical Center
☐ Participating in Education Activities
☐ Working with Young People
☐ Scholarships
☐ Community Volunteerism / Assistance
☐ Auxiliary Emergency Fund
☐ Helping with Unit Activities
☐ Fundraising
☐ Member Benefits
☐ Other _____

Recruiter's Name _____ Unit/Post # _____ City _____ State _____

The following individual(s) might also be interested in joining or volunteering.

Please contact: _____ Phone # _____

_____ Phone # _____

_____ Phone # _____

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Mail Completed Applications to Your Department State Headquarters!

For Current Department Address go to: http://www.legion-aux.org/ContactUs/StateDirectory/Index.aspx

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