



American Legion Auxiliary MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name	(First)	(M.I.)	(Last)
Address			
City	State	ZIP	
Home Phone	Cell Phone	Email Address	
/	/	☐ Birth - 17	☐ 18 and over
Date of Birth (Required)		Unit #	Location
Have you been a member previously? ☐ Yes ☐ No (If yes, fill in below.)			
Previous Unit City/State		ALA ID # (if known)	
		/ /	
Signature of Applicant (or legal guardian if under 18)			Date

ELIGIBILITY INFORMATION

Eligible Through—Name of Veteran (Female Veterans: List Your Own Name)

If Living: American Legion Member ID # (Required) Post # City State

☐ Deceased—If veteran is deceased, contact ALA unit about the necessary military records.
For Veteran's DD214 Discharge Papers: www.archives.gov/veterans/military-service-records

Veteran Served:

☐ WWI (4/6/1917-11/11/1918)

Anytime After 12/7/1941 (check all that apply):

☐ Global War on Terror	☐ Panama	☐ Vietnam	☐ WWII
☐ Gulf War	☐ Lebanon/Grenada	☐ Korea	☐ Other Conflicts

Applicant's Relationship to the Veteran:

☐ Male Spouse	☐ Female Spouse	☐ Mother	☐ Grandmother	☐ Sister	☐ Self
☐ Daughter	☐ Granddaughter				

To be Completed by an Officer of The American Legion or American Legion Auxiliary

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.

Officer Membership Verification / Date

HELP US GET YOU CONNECTED!

I am interested in learning more about:

- ☐ Volunteering for Veterans, Military, and Their Families
- ☐ Youth Activities, Including ALA Girls State, Junior Member Programs, and Scholarships
- ☐ Member Discounts and Services
- ☐ Other

Please contact the following individual about volunteering or joining the American Legion Auxiliary:

Name	Phone	Email
Name	Phone	Email
Name	Phone	Email
Recruiter's Name	Unit/Post #	City State

Submit this application to the ALA unit you wish to join. If unit is unknown, contact National Headquarters at (317) 569-4500 for assistance. Annual dues must accompany completed application. Ask local contact for amount due. **Membership pending approval of application.**