



Applicant Name: Mr Mrs Ms _____
Surname Given names

Address: _____
Street / PO Box / RR # / Site # City Prov Postal Code

Home Tel: _____ **Other Tel:** _____ **E-mail:** _____

Date of Birth: _____ **Citizenship:** _____ **M** **F**
dd/mm/yyyy

Have you ever been a member of the Legion? No Yes If yes, Membership # _____

Membership Type *Please complete any applicable membership types below:

- Ordinary** – Indicate Type of Service and Service # _____
 Type of Service: Reserve "C Class" Wartime Can. Reg. Force Her Majesty's Reg. Force Reserve
 NATO RCMP R.N.F. Constabulary Wartime Allied Force Underground Force
 Coast Guard NORAD US Force Vietnam Police Force
 Cadet Instructor Cadre (CIC) Non-military
- Associate**
 Relationship: I am the spouse, widow/er, parent, child, grandchild, sibling, niece/nephew of a person who is/was eligible for Ordinary membership. Indicate relationship: _____
 I am the child, spouse, sibling of an Associate member of Command/Branch #: _____ and whose Name and Membership # is: _____
- OR** Type of Service Cadets or Cadet Civilian Instructor Navy League of Canada Service #: _____
 Federal or Provincial Emergency Response Service Polish Armed Forces
- Affiliate Voting:** I am a Canadian citizen or Commonwealth subject from an Allied nation and support the aims and objects of The Royal Canadian Legion.
- Affiliate Non-Voting:** I am a non-Canadian citizen or a non-Commonwealth subject from an Allied nation and support the aims and objects of The Royal Canadian Legion.

LEGION Magazine Subscription

Membership dues include a one-year subscription rate of \$9.49 plus applicable taxes.

I would like the French insert. I do not wish to receive my copies of LEGION Magazine.

Membership Declaration and Initiation

The Royal Canadian Legion's mission is to serve veterans, which includes serving military and RCMP members and their families, to promote remembrance and to serve our communities and our country.

I support the mission statement of the Royal Canadian Legion

I have read and agree to support the purposes and objects of the Royal Canadian Legion (located in the General By-Laws)

I hereby solemnly declare that I am not a member, nor affiliated with, any group, party or sect whose interests conflict with the avowed purposes of the Legion, and I do not, and will not, support any organization advocating the overthrow of our government by force or which advocates, encourages or participates in subversive action or propaganda

I hereby certify that I have never been expelled, or had my membership revoked, from any Legion Branch or any other Veterans organization

I hereby certify that I have never been dishonourably discharged from, deserted from nor evaded service in the Forces of any country

I agree to participate in the annual Poppy Campaign

I agree to abide by the constitution, rules and by-laws of the Royal Canadian Legion.

_____ Initial here to confirm you agree with the above declaration and requirements.

Personal Information Consent

I understand that the personal information collected on this form will be used by The Royal Canadian Legion ("Legion") for the purposes of processing my membership application and communicating with me about my membership, and may be used internally by the Legion at the national, provincial and branch levels for administration purposes and for the other purposes provided in its Privacy Statement at legion.ca/legal. By completing, signing and submitting this form, I am giving my consent for the Legion to collect, use or disclose my personal information for these purposes. I understand that I may withdraw my consent at any time by contacting Legion Member Services at 855-330-3344.

Applicant Signature: _____ Date: _____

Congratulations you are now an initiated member of the Royal Canadian Legion subject to Branch policy. Further welcoming ceremony processes are at the discretion of your local Branch.

Legion Branch

Command: _____ Branch Name: _____ Branch #: _____

Branch Address: _____

Service Information

Person who served: Self or (Name): _____ Relationship: _____ who is/was
an Ordinary Member of Command/Branch: _____ Membership #: _____
Service # _____

Documentation

Service Record Discharge Certificate Marriage Certificate Birth Certificate Adoption Certificate

Other: _____

Discharge Date: _____ Type of Discharge: _____

Theatres of Service: _____ Medals/Decorations: _____

Next of Kin

Name: _____ Relationship: _____ Tel: _____

Administration *Administration section to be completed in office by admin only

Certified that section 221 of the General By-Laws has been applied and that satisfactory proof of service and relationship has been submitted where applicable.

Branch Membership Committee: _____ Date: _____

Date Passed at General Meeting: _____ Date of Initiation: _____

Membership Dues Paid: _____ Date: _____

Membership Registration Form and Per Capita Tax Submitted to Dominion Command Date: _____

Record of Legion Service

Date of Original Admission to Legion: _____ Membership #: _____ Date of Initiation: _____

Branch Joined

Command & Branch #	Location	Date Joined	Date Left

Office Held

Honours and Awards Held

Command & Branch #	Office	Date	Command & Branch #	Award	Date