



**Marine Corps League  
Application for Membership**

Full Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ + \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ E-Mail Address \_\_\_\_\_

Date of Enlistment/Commissioning \_\_\_\_\_ Date of Discharge/Retirement/Separation \_\_\_\_\_

Type of Application - New ( ) Renewal ( ) Membership Type---Regular ( ) Associate ( ) Dual ( )

*Have you ever been convicted of a felony? YES  NO  If yes is checked, I agree to waive my rights under the Privacy Act and disclose the nature of the felony conviction for consideration of membership in the Marine Corps League.*

( ) I hereby apply for membership in the \_\_\_\_\_ Detachment, Marine Corps League and enclose \$ \_\_\_\_\_ for one year's membership \*

( ) I hereby apply for membership in the Marine Corps League as a Member-at-Large (MAL) and enclose \$30 for one year's membership \*

*\*Includes free subscription to "Semper Fi", The Magazine of the Marine Corps League)*

I hereby certify that I am currently serving or have served honorably in the United States Marine Corps, **"ON ACTIVE DUTY,"** for not less than ninety (90) days and earned the Eagle, Globe and Anchor;\* or have served or am currently serving in the United States Marine Corps Reserve and have earned no less than ninety (90) Reserve Retirement Credit Points; or that I have served or am currently serving as a U.S. Navy FMF Sailor who has earned the FMF Device or FMF Ribbon. If discharged, I am in receipt of a DD Form 214 or a Certificate of Discharge indicating "Honorable Service". ("Honorable Service" will be defined by the last DD Form 214 or Certificate of Discharge that the applicant received). *General Discharge under Honorable Conditions is acceptable.* By signature on this application, I hereby agree to provide proof of honorable service/discharge upon request. I understand the DD Form 214 may contain information such as military awards, training, and character of service.

\_\_\_\_\_  
(Sponsor where applicable)

\_\_\_\_\_  
Applicant's Signature (see reverse side)

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