



## AMERICAN LEGION AUXILIARY

### MEMBER DATA FORM

Member ID# \_\_\_\_\_

Date \_\_\_\_\_

*(Required for all changes)*

Name \_\_\_\_\_

ARIZONA Unit # \_\_\_\_\_ District # \_\_\_\_\_

☐ SR ☐ JR ☐ DECEASED, date of death \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ PUFL ☐ Honorary Life Member

### CORRECTIONS

#### Old Information

Name \_\_\_\_\_

Former Address \_\_\_\_\_

Former City \_\_\_\_\_

Former State \_\_\_\_\_ Zip \_\_\_\_\_

Former Telephone # (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

#### New Information

Name \_\_\_\_\_

New Address \_\_\_\_\_

New City \_\_\_\_\_

New State \_\_\_\_\_ Zip \_\_\_\_\_

New Telephone # (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

### UNIT TRANSFERS

**PREVIOUS** Unit # \_\_\_\_\_ Department \_\_\_\_\_

**NEW** Unit # \_\_\_\_\_ Department \_\_\_\_\_

Signature - Member **(Required)**

Signature - New Unit Officer **(Required)**

### ADDITIONAL INFORMATION

Continuous Years of Membership \_\_\_\_\_ for \_\_\_\_\_ *(Paid Years)*

*Comments or Notes:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**AMERICAN LEGION AUXILIARY  
MEMBER DATA FORM  
INSTRUCTIONS**

1. The Member Data Form should be used to report name changes, address changes, continuous year changes, Unit transfers and deceased member(s).
2. The Member ID Number and address, Unit Number and name of Department are required for a Member Data Form to be processed by Department.

**The following information pertains to transfers only:**

Transfer from one Unit to another is a privilege granted to any paid-up Auxiliary member ONLY with the approval of the Unit to which the member desires to transfer.

**TRANSFER MAY BE MADE UNDER THE REGULATIONS LISTED BELOW:**

1. No transfer shall be made unless the member requesting transfer has a membership card showing that she is a member in good standing at the time transfer is requested. Members whose dues for the current calendar year are not paid by January 31st of that year are suspended, and not in good standing, and are not eligible for transfer.
2. No charge shall be made to the member for the privilege of transfer and no dues shall be transferred from one Unit to another. The accepting Unit may require payment of difference in dues on a pro-rata basis if dues are higher than transferring member's former Unit.
3. Any Auxiliary member desiring transfer of membership must first secure approval from the Unit to which transfer is desired. She may do this orally or by letter. The Secretary of the new Unit will then complete and route the parts of the form as instructed below. She will also contact the old Unit to inform them of the transfer.
4. The Department office will carry through necessary procedures to transfer member's record to the new Unit, provided member's current record is on file and provided information on transfer certificate is complete.
5. All Member Data Forms for members transferring to another Department should be sent to the Department office for processing.

**MAIL THE MEMBER DATA FORM TO: Department Headquarters**  
(Department will forward to National when applicable)

**AMERICAN LEGION AUXILIARY  
Department of Arizona  
4701 N 19 Avenue  
Phoenix, AZ 85015**