

ALA-MIS Setup Request Form
American Legion Auxiliary
Department of Alabama

Type of request:

- Add New User
- Replace Current User
- Change Current User access level
- Deactivate Current User Only (not replacing)

Unit Member Name (Requesting Access):

First: _____ Last: _____

Unit Member Name being Replaced or Removed:

First: _____ Last: _____

Unit Member ID Number:

Unit Member Email Address:

Unit Number: _____

District Number: _____

Access Level Requested (Choose Only One):

- Unit View \$10.00 (View Only – make no changes)
- Unit Write \$15.00 (Update records & enter New Member Applications)
- Unit Full Access \$20.00 (Pay dues & make changes. MUST attend training)
- District View \$10.00 (aka Department Read Only)