



SPRING BRANCH AMERICAN LEGION POST 654

3105 Campbell Rd., Houston, TX 77080
(713) 462-5290

Membership Application Form

Yes! I wish to join my fellow Veterans who still wish to serve our Country and our Community by becoming a member of the Spring Branch American Legion Post 654.

Name: _____

Address: _____

City, St & Zip: _____

Phone Number: _____ Email Address: _____

Date of Birth: _____ Male Female

How did you hear of us? _____

Recruited by: _____ Annual Dues of \$45.00 paid _____

Branch of Service:

U.S. Army U.S. Navy U.S. Air Force U.S. Marines

U.S. Coast Guard Merchant Marines 12/7/41-8/15/45 (only eligibility)

Era: _____

Transfer: Yes No Membership Number: _____ Post: _____

My signature below certifies that I served at least one day of active duty during the time period of Dec. 7th 1941 to present AND was honorably discharged or am still serving honorably. I will furnish a copy of my DD-214 or other proof of honorable service to the Post Adjutant within 30 days of this date. All applications for membership are subject to the approval of the Post Executive Boards.

Signature of Applicant: _____ Date: _____