

The American Legion Membership Application

NAME

DATE OF BIRTH

Format: mm/dd/yyyy - select date by clicking inside box

MAILING ADDRESS

PHONE NO.

CITY

STATE

ZIP

POST NO.

MALE

FEMALE

EMAIL

DUES

I certify that I served at least one day of active military duty since December 7, 1941 and was honorably discharged or am still serving honorably.

Please check appropriate service era and branch of service below

Global War on Terror

Gulf War

Panama

Lebanon/Grenada

Vietnam

Korea

WWII

Other Conflicts

U.S. Army

U.S. Navy

U.S. Air Force

U.S. Marines

U.S. Space Force

U.S. Coast Guard

Merchant Marines (WWII only)



DATE

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SIGNATURE OF APPLICANT

NAME OF RECRUITER