

Recruiter's Name

American Legion Auxiliary MEMBERSHIP APPLICATION

		— APPLICA	NT INFORMATION	ON ———		
Name	(First)		(M.I.)		(Last)	
Address						
City			State		ZIP	
Home Phone Cell Phone				Email Address		
/ / Birth - 17				Location		
	a member previously?	es 🖵 No (If ye	es, fill in below.)			
Previous Unit Ci	ty/State			A	LA ID # (if known)	
Signature of App	olicant <i>(or legal guardian if und</i>		/ / / Date			
- Signature of App	mount (or rogar guardian in una				Duto	
		— ELIGIBIL	ITY INFORMATIO	ON ———		
Eligible Through	—Name of Veteran (Female V	Veterans: List Vour	Own Nama)			
	— Name of Veteran (Female V	eterans. List Tour	Own Name)			
If Living:Ame	erican Legion Member ID#	Post #	<u> </u>	City		State
	f veteran is deceased, contact			•		Otato
	DD214 Discharge Papers: wv					
Veteran Serve		<u> </u>	-			
₩ WWI (4/6/19						
	· 12/7/1941 (check all that app	nlv).				
	Var on Terror		Vietnam	□ wwii		
Gulf Wa	-	non/Grenada	☐ Korea	Other Conflicts	3	
_	-		- Notea	_ Caler Commics	,	
	elationship to the Veterar				□	
Male Spouse	·	Mother	Grandmother	Sister	🔲 Self	
Daughter	Granddaughter					
To Be Comple I certify that the a or is still serving	eted By The American Legabove named individual served honorably.	gion Post Adjuta d at least one day o	ant/Officer of active duty during the	ne dates marked ab	ove and was honor	ably discharged
Post Adjutant/Of	ficer Membership Verification				Date	
		HEI DIIS GE	T YOU CONNEC	TED!		
		HELP US GE	I TOU CONNEC	IED:		
	in learning more about:					
	ng for Veterans, Military, and T					
	rities, Including ALA Girls State	e, Junior Member P	rograms, and Schola	rships		
	scounts and Services					
Other						
Please contact tl	he following individual about v	olunteering or joinii	ng the American Legio	on Auxiliary:		
Name			Phone	e Email		
Name			Phone	_	Email	
				_		
Name			Phone		Email	

State

City

Unit/Post #