

The American Legion Membership Application

LEGION ACT

(Name)	(Date of Birth)
(Mailing Address)	(Phone Number)
(City)	(State) (Zip) (Post #)
(E-mail)	<input type="checkbox"/> Male <input type="checkbox"/> Female (Gender) (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

- | | |
|--|--|
| <input type="checkbox"/> Global War on Terror
<input type="checkbox"/> Gulf War
<input type="checkbox"/> Panama
<input type="checkbox"/> Lebanon/Grenada
<input type="checkbox"/> Vietnam
<input type="checkbox"/> Korea
<input type="checkbox"/> WWII
<input type="checkbox"/> Other Conflicts | <input type="checkbox"/> U.S. Army
<input type="checkbox"/> U.S. Navy
<input type="checkbox"/> U.S. Air Force
<input type="checkbox"/> U.S. Marines
<input type="checkbox"/> U.S. Coast Guard
<input type="checkbox"/> Merchant Marines (WWII only) |
|--|--|



30-009 Signature of applicant Date Name of recruiter

Receipt of Dues

(Please Print)

From _____

\$ _____ for 20 _____ Post # _____

Recruiter's Name _____

Recruiter's Signature _____

Recruiter's Phone # _____