

Please return completed application to:



The American Legion
Attn: Membership
P.O. Box 7017
Indianapolis, IN 46207



AMERICAN LEGION
MEMBERSHIP APPLICATION

D36NET

YES! I'll help my fellow veterans by becoming a member of The American Legion. I certify that I served at least one day of active military duty during the dates marked below and was honorably discharged or am still serving honorably.

Please send my Branch of Service lapel pin:

\$20.00 check or money order enclosed

SOCIAL SECURITY NO. - -
(OPTIONAL)

BIRTH DATE - -

Mastercard	VISA
ACCOUNT NUMBER	
EXPIRATION DATE	-

Dates of Service	Branch of Service
AUG 2, 1990—OPEN	U.S. ARMY
DEC. 20, 1989—JAN. 31, 1990	U.S. NAVY
AUG. 24, 1982—JUL. 31, 1984	U.S. AIR FORCE
FEB. 28, 1961—MAY 7, 1975	U.S. MARINES
JUNE 25, 1950—JAN. 31, 1955	U.S. COAST GUARD
DEC. 7, 1941—DEC. 31, 1946	
APR. 6, 1917—NOV. 11, 1918	
U.S. MERCHANT MARINE — DEC. 7, 1941—AUG. 15, 1945	

Name _____

Address _____

City, State, Zip _____

Phone Number _____

Signature _____

Please. tell us how/where did you hear about The American Legion

June 19, 2001- INET