The American Legion Membership Application (Name) (Phone) (Mailing Address) (Date) 176 (City) (State) (Zip) (Post) \$25.00/year Please check appropriate elibigibility dates and branch of service below (Dues) ☐ Aug. 2, 1990 - cessation of hostilities as determined by U.S Government ☐ Dec. 20, 1989-Jan. 31, 1990 ☐ Aug. 24, 1982-July 31, 1984 ☐ U.S. Army ☐ Dec. 22, 1961- May 7, 1975 ☐ U.S. Navy ☐ June 25, 1950-Jan. 31, 1955 ☐ U.S. Air Force ☐ Dec. 7, 1941-Dec. 31, 1946 ☐ U.S. Marines ☐ April 6, 1917-Nov. 11, 1918 □ U.S. Coast Guard I certify that I served at least one day of active military duty during the dates marked above and was honorably discharged or am still serving honorably. (Signature of Applicant) (Name of Recruiter) Listed below are just a few of the many programs the American Legion sponsors. Please check the one(s) that are of interest to you. If the program you like is not listed, please indicate it in the "other" area. ☐ Volunteer work at VA Hospital. ☐ Work with youth. ☐ Help/participate in Post's social activities (dances, dinners, etc.) ☐ Participate in educational activities (essay contests, oratorical contests, scholarships) ☐ Work with sports teams. Supervise groups (drill team, drum & bugle, scouts, etc.) Post improvement projects. ☐ Membership drives. Community projects. Other: ☐ Wife would be interested in Auxiliary. ☐ Son would be interested in the Sons of American Legion.