



# American Legion Auxiliary MEMBERSHIP APPLICATION

## APPLICANT INFORMATION

Name (First) (M.I.) (Last)

Address

City State ZIP

Home Phone Cell Phone Email Address

/ /  Birth - 17  18 and over

Date of Birth (Required) Unit # Location

Have you been a member previously?  Yes  No (If yes, fill in below.)

Previous Unit City/State ALA ID # (if known)

/ /

Signature of Applicant (or legal guardian if under 18) Date

## ELIGIBILITY INFORMATION

Eligible Through—Name of Veteran (Female Veterans: List Your Own Name)

If Living: American Legion Member ID # Post # City State

Deceased—If veteran is deceased, contact ALA unit about the necessary military records.  
For Veteran's DD214 Discharge Papers: [www.archives.gov/veterans/military-service-records](http://www.archives.gov/veterans/military-service-records)

### Veteran Served:

WWI (4/6/1917-11/11/1918)  
 Anytime After 12/7/1941 (check all that apply):  
 Global War on Terror  Panama  Vietnam  WWII  
 Gulf War  Lebanon/Grenada  Korea  Other Conflicts

### Applicant's Relationship to the Veteran:

Male Spouse  Female Spouse  Mother  Grandmother  Sister  Self  
 Daughter  Granddaughter

### To Be Completed By The American Legion Post Adjutant/Officer

I certify that the above named individual served at least one day of active duty during the dates marked above and was honorably discharged or is still serving honorably.

Post Adjutant/Officer Membership Verification / Date

## HELP US GET YOU CONNECTED!

### I am interested in learning more about:

- Volunteering for Veterans, Military, and Their Families
- Youth Activities, Including ALA Girls State, Junior Member Programs, and Scholarships
- Member Discounts and Services
- Other

Please contact the following individual about volunteering or joining the American Legion Auxiliary:

Name Phone Email

Name Phone Email

Name Phone Email

Recruiter's Name Unit/Post # City State

Submit this application to the ALA unit you wish to join. If unit is unknown, contact National Headquarters at (317) 569-4500 for assistance. Annual dues must accompany completed application. Ask local contact for amount due. **Membership pending approval of application.**