



American Legion Auxiliary

Department of Michigan

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www.michalaux.org

APPLICATION FOR ALA MIS ACCESS INFORMATION

UNIT#: _____

MEMBER NAME: _____

MEMBER # _____

*CHAIR HELD WITHIN UNIT: _____

MEMBER ADDRESS:

MEMBER EMAIL: _____

MEMBER TELEPHONE#: _____

Please attach a check made out to the order of:

ALA DEPT. OF MI (current access fee for 2020 is: \$15.00 per person)

*Only 2 chair holders per Unit may sign up and request access to ALA MIS per year and the fee is \$15.00 per person currently.