JOIN OUR LEGION FAMILY!
The American Legion, American Legion Auxiliary, and Sons of The American Legion have worked decades, steadfastly and side by side, by promoting patriotism and national security while supporting youth and advocating for veterans and military. The American Legion Family also includes American Legion Riders, a program of motorcycle enthusiasts. Members join through a Riders chapter at an American Legion post.

While members of The American Legion Family are individually unique, collectively we are a multimillion member powerhouse of caring advocates dedicated to service. You and your family can join us! Please use the enclosed applications and send to the proper authority as instructed.

The American Legion Family online:
The American Legion
www.legion.org
American Legion Auxiliary
www.ALAforVeterans.org
Sons of The American Legion
www.legion.org/sons
American Legion Riders
www.legion.org/riders

There are many opportunities for involvement in the American Legion Auxiliary. Help us get you connected!

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

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Re: Volunteering

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
- Other _______________________________________________________________________________________________

American Legion Auxiliary

MISSION:
In the spirit of Service Not Self, the mission of the American Legion Auxiliary is to support The American Legion and honor the sacrifice of those who serve by enhancing the lives of our veterans, military, and their families, both at home and abroad.

Visit us online at www.ALAforVeterans.org

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American Legion Auxiliary
THE AMERICAN LEGION – MEMBERSHIP APPLICATION

Name: ____________________________  First  Initial  Last  Date of Birth: ____________________________

Address: ____________________________  Street  City  State  ZIP  ☐ Male  ☐ Female

Membership ID# former member: ____________________________  Post #: ____________________________  Phone #: ____________________________  Email: ____________________________  Gender: ____________________________

Please check war era and branch of service below:
☐ Global War on Terror  ☐ U.S. Army
☐ Gulf War  ☐ U.S. Navy
☐ Panama  ☐ U.S. Air Force
☐ Lebanon/Grenada  ☐ U.S. Marines
☐ Vietnam  ☐ U.S. Space Force
☐ Korea  ☐ U.S. Coast Guard
☐ WWII  ☐ Merchant Marines (WWII only)
☐ Other Conflicts

I certify that I have served federal active duty in the United States Armed Forces since December 7, 1941, and have been honorably discharged or I am still serving.

Signed by applicant ____________________________  Date ____________________________  Name of recruiter ____________________________

If you are a new member, send this completed application with annual dues to The American Legion, Attn: Membership, P.O. Box 1055, Indianapolis, IN 46206 (check www.legion.org/join for dues amount), or take it to a local post. To locate a post near you, click on “Find a Post” at www.legion.org.

D17010

SONS OF THE AMERICAN LEGION – MEMBERSHIP APPLICATION

Date: ____________________________

Detachment of ____________________________  Squadron No. ____________________________  Birth date ____________________________

Name: ____________________________  First  Initial  Last  Recruited by: ____________________________  Initial  Last

Address: ____________________________  Street  City  State  ZIP  Phone: ____________________________

Veteran through whom eligibility is established:

(a) Above is a member in good standing of Post No. ____________________________  Department of ____________________________

OR (b) Above is a deceased veteran who served honorably from ____________________________ to ____________________________

(c) Relationship of applicant to veteran: ____________________________

I hereby subscribe to the Constitution of the Sons of The American Legion and apply for membership.

Email: ____________________________  Transmit $ ____________________________ for 20 _________ annual membership dues

Signed by applicant (or legal guardian if under 18) ____________________________  Date ____________________________  Eligibility certified by ____________________________

Mail completed application to Sons of The American Legion department/state headquarters. Annual dues must accompany completed application. Ask local contact for amount due. For current detachment address, go to The American Legion department/state headquarters, or visit www.legion.org.

D17010

AMERICAN LEGION AUXILIARY – MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Full Name: ____________________________

Address: ____________________________  City  State  ZIP

City  State  ZIP

Home Phone: ____________________________  Cell Phone: ____________________________

Email Address: ____________________________

Unit # and Location (if known): ____________________________

Date of Birth (Required): ____________________________

Date of Birth (if known): ____________________________

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

Previous Unit City/State: ____________________________  ALA ID#: ____________________________

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

Submit this application to the ALA unit you wish to join. If it 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.

D17010

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 ____________________________

D17010