



American Legion Auxiliary

Membership Applications for Joining Your American Legion Family



Your American Legion Family

In the Spirit of Service Not Self for Veterans, God and Country

JOIN THE LEGION FAMILY!

For nearly a century, The American Legion, American Legion Auxiliary, and Sons of The American Legion have worked steadfastly, side by side, 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! You'll find that getting connected to The American Legion Family is one of the best decisions you'll ever make. 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.ALforVeterans.org

Sons of The American Legion
www.legion.org/sons

American Legion Riders
www.legion.org/riders



**American Legion Auxiliary
National Headquarters**
8945 N. Meridian St., Indianapolis, IN 46260
P: (317) 569-4500 | F: (317) 569-4502
www.ALforVeterans.org
www.ALAFoundation.org

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Produced in the USA

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 to honor the sacrifice of those who serve by enhancing the lives of our veterans, military, and their families, both at home and abroad. For God and Country, we advocate for veterans, educate our citizens, mentor youth, and promote patriotism, good citizenship, peace and security.



World's largest women's patriotic service organization

There are many opportunities for involvement in the American Legion Auxiliary. 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 _____

Recruiter's Name _____ Unit/Post # _____ City _____ State _____

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

Name _____	Phone _____	Email _____
Name _____	Phone _____	Email _____
Name _____	Phone _____	Email _____

Visit us online at www.ALforVeterans.org



THE AMERICAN LEGION – MEMBERSHIP APPLICATION



Name _____ (First) _____ (Initial) _____ (Last) _____ (Phone) _____

Address _____ (Street) _____ (City) _____ (State) _____ (Zip) _____

_____ (Membership ID# Former Member) _____ (Email) _____ (Post #) _____ (Date)

Please check appropriate eligibility dates and branch of service below:

- | | |
|--|---|
| <input type="checkbox"/> WWI (4/6/17-11/11/18) | <input type="checkbox"/> U.S. Army |
| <input type="checkbox"/> WWII (12/7/41-12/31/46) | <input type="checkbox"/> U.S. Navy |
| <input type="checkbox"/> Korea (6/25/50-1/31/55) | <input type="checkbox"/> U.S. Air Force |
| <input type="checkbox"/> Vietnam (2/28/61-5/7/75) | <input type="checkbox"/> U.S. Marines |
| <input type="checkbox"/> Lebanon/Grenada (8/24/82-7/31/84) | <input type="checkbox"/> U.S. Coast Guard |
| <input type="checkbox"/> Panama (12/20/89-1/31/90) | <input type="checkbox"/> Merchant Marines (12/7/41-12/31/46 - Only Eligibility) |
| <input type="checkbox"/> Persian Gulf/War on Terrorism (8/2/90 until cessation of hostilities) | |

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.

Signed By Applicant _____ Name of Recruiter _____

Mail completed application to The American Legion National Headquarters, Attn: Internal Affairs. Annual dues must accompany completed application. Ask local contact for amount due. For current department address, go to www.legion.org.

ALA 02/2016

**DUES RECEIPT
(Please Print)**

_____ Date

_____ Received From

\$ _____ for 20 _____ Dues

_____ Recruiter's Name

_____ Recruiter's Signature

_____ Recruiter's Phone #



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 _____

Has Applicant previously been a member of the SAL? _____ Where? _____

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

Email Address _____ Transmit \$ _____ for 20 _____ annual membership dues

Signed By Applicant (or Parent) _____ 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.

ALA 12/2013

**DUES RECEIPT
(Please Print)**

_____ Date

_____ Received From

\$ _____ for 20 _____ Dues

_____ Squadron No.

_____ Department of



AMERICAN LEGION AUXILIARY – MEMBERSHIP APPLICATION

**APPLICANT INFORMATION**

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

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____ Unit # and Location _____

_____ / _____ / _____ Birth - 17 18 and over

Date of Birth (Required)

Have you been a member previously? Yes No

_____ / _____ / _____

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

ELIGIBILITY INFORMATION

Living Deceased

Eligible Through-Name of Veteran (if living, must be American Legion member) _____

American Legion Member ID Number _____

Veteran's American Legion Post Name _____ Post # _____ City _____ State _____

Veteran Served: (check all that apply)

<input type="checkbox"/> WWI (4/6/17-11/11/18)	<input type="checkbox"/> WWII (12/7/41-12/31/46)
<input type="checkbox"/> Merchant Marines (12/7/41-12/31/46)	<input type="checkbox"/> Korea (6/25/50-1/31/55)
<input type="checkbox"/> Vietnam (2/28/61-5/7/75)	<input type="checkbox"/> Lebanon/Grenada (8/24/82-7/31/84)
<input type="checkbox"/> Panama (12/20/89-1/31/90)	<input type="checkbox"/> Persian Gulf/War on Terrorism (8/2/90 until cessation of hostilities)

Applicant's Relationship to the Veteran:

<input type="checkbox"/> Mother	<input type="checkbox"/> Wife	<input type="checkbox"/> Daughter	<input type="checkbox"/> Sister
<input type="checkbox"/> Grandmother	<input type="checkbox"/> Granddaughter	<input type="checkbox"/> Great-Granddaughter	<input type="checkbox"/> Self

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 _____ ALA 02/2016 _____ Date _____

**DUES RECEIPT
(Please Print)**

_____ Date

_____ Received From

\$ _____ for 20 _____ Dues

_____ Recruiter's Name

_____ Recruiter's Signature

_____ Recruiter's Phone #

Mail completed application to American Legion Auxiliary department/state headquarters. Annual dues must accompany completed application. Ask local contact for amount due. For current department address go to: www.ALforVeterans.org/contact/state_headquarters. Dues include a yearly non-refundable allocation of \$3.40 for American Legion Auxiliary magazine. **Membership pending approval of application.**