



PRINT FORM

The American Legion Membership **FY 2016** Application

YES I'll help my fellow veterans by becoming a member of The American Legion. I certify that I served at least one day of active military duty during the dates marked below and was honorably discharged or am still serving honorably. Please send my current membership card.

Please check method of payment:

My **\$38.00** check or money order is enclosed.

*NOTE: **National Dues: \$29.00, Post dues \$9.00**

**Please check applicable "Dates of Service"
and "Branch of Service":**

DATES OF SERVICE	BRANCH OF SERVICE
<input type="checkbox"/> AUG. 2, 1990 - OPEN	<input type="checkbox"/> U.S. ARMY
<input type="checkbox"/> DEC. 20, 1989 – JAN. 31, 1990	<input type="checkbox"/> U.S. NAVY
<input type="checkbox"/> AUG. 24, 1982 – JUL. 31, 1984	<input type="checkbox"/> U.S. AIR FORCE
<input type="checkbox"/> FEB. 28, 1961 – MAY 7, 1975	<input type="checkbox"/> U.S. MARINES
<input type="checkbox"/> JUNE 25, 1950 – JAN. 31, 1955	<input type="checkbox"/> U.S. GOAST GUARD
<input type="checkbox"/> DEC. 7, 1941 – DEC. 31, 1946	
<input type="checkbox"/> APR. 6, 1917 – NOV. 11, 1918	
<input type="checkbox"/> U.S. MERCHANT MARINE — DEC. 7, 1941 – DEC. 31, 1946	

NAME

ADDRESS

CITY, STATE, ZIP

PHONE

E-MAIL ADDRESS

BIRTH DATE

SIGNATURE

PLEASE ALSO INCLUDE A COPY OF YOUR DD214 OR DISCHARGE PAPERS

Please return completed application, your payment of **\$38.00**, and copy of your DD214 or Discharge Papers to:

Perry Anderson, Membership Chairman

American Legion Post 1864

11832 Trail Sky Ct.

Parker, Colorado, 80134

PH: 303-284-6719

E-Mail: membershipchairman@post1864.org

Please tell us how/where you heard about The American Legion and if you have any questions.