

**AMERICAN LEGION MEMBERSHIP APPLICATION**

I've enclosed my \$35.00 check or money order.

**OR**

Please charge \$35.00 to my Visa or MasterCard Account:

**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 in the US Armed Forces during the dates marked below and was honorably discharged or am still serving honorably.

Acct. #   
Exp. Date  Security Code   
**(Please do not send cash)**

Please check applicable Eligibility Period and Branch of Service shown below. **This information is required.**

**Eligibility Periods:**

**Branch of Service:**

- August 2, 1990 - Open
- Dec. 20, 1989 - Jan. 31, 1990
- August 24, 1982 - July 31, 1984
- Feb. 28, 1961 - May 7, 1975
- June 25, 1950 - Jan. 31, 1955
- Dec. 7, 1941 - Dec. 31, 1946
- April 6, 1917 - Nov. 11, 1918
- US Merchant Marine Dec. 7, 1941 - August 15, 1945

- US Army
- US Navy
- US Air Force
- US Marines
- US Coast Guard

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City St Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print form, fill out, and sign. Enclose your check, or money order. Mail to:

The American Legion, Post 157  
310 Thrift Rd  
Madison, VA 22727

Please put [attention membership] on the envelope.

If you are paying by credit card, you can scan the completed form and e-mail to: [adjutant@vaalpost157.org](mailto:adjutant@vaalpost157.org), if you prefer.