

Please return completed application to:



The American Legion  
Attn: Membership  
P.O. Box 61  
Underwood, MN 56586



**AMERICAN LEGION  
MEMBERSHIP APPLICATION**

**D66NET**

**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 me my current membership card.

**Please check method of payment:**

- my \$30.00 check or money order enclosed
- Bill my credit card for \$30.00  
(See box at right)

Mastercard	VISA
ACCOUNT NUMBER	
EXPIRATION DATE	-

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. COAST GUARD
<input type="checkbox"/> DEC. 7, 1941—DEC. 31, 1946	
<input type="checkbox"/> APR. 6, 1917—NOV. 11, 1918	
U.S. MERCHANT MARINE — DEC. 7, 1941—AUG. 15, 1945	

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Birth Date      -      -  
\_\_\_\_\_

Signature \_\_\_\_\_

Please tell us how/where you heard about The American Legion:

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