

The American Legion Membership Application

(Name) _____ (Phone) _____

(Mailing Address) _____ (Date) _____

(City) _____ (State) _____ (Zip) _____ (Post #) _____

(Membership ID# former member) _____ (Email Address) _____ (Dues) _____

- Please check appropriate eligibility dates and branch of service below**
- Aug 2, 1990 – cessation of hostilities as determined by U.S. Government
 - Dec. 20, 1989 – Jan. 31, 1990
 - Aug. 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
 - U.S. Army
 - U.S. Navy
 - U.S. Air Force
 - U.S. Marines
 - U.S. Coast Guard
 - Merchant Marines 12/7/41 – 12/31/46 (only eligibility)



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.

Signature of applicant _____ Name of recruiter _____

30-009 (2009)

Receipt of Dues

(Please Print)



From _____ Post # _____

\$ _____ for 20 _____

Recruiter's Name _____

Recruiter's Signature _____

Recruiter's Phone # _____

Applications for membership

Print out this page

fill in appropriate blanks and cut out appropriate form

Post #3 American Legion yearly dues - \$33.00

Unit #3 American Legion Auxiliary yearly dues - \$10.00 (Senior) \$2.00 (Junior)

send form with check or money order to:

American Legion Matthew Brew Post #3

Attention: Membership

621 1st St W Dickinson ND 58601



American Legion Auxiliary - APPLICATION FOR MEMBERSHIP

Please print in black ink only.

Applicant Information

Eligibility Information

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

Address _____

City _____ State _____ Zip _____

Phone (Work) _____ (Home) _____

E-mail address _____ Date of Birth _____

- Senior (over 18)
- Junior (birth - 18)

Unit Number & Location _____

Signature of Applicant (or legal guardian if Junior member) _____ Date _____

Name of Veteran Eligible Through _____

American Legion Post _____ Post # _____ City _____ State _____

Legion Member ID Number _____ Veteran: Living Deceased

- Veteran served in:**
- WWI (4/6/17-11/11/18)
 - Merchant Marines (12/7/41-8/15/45 Only)
 - Vietnam (2/28/61-5/7/75)
 - Panama (12/20/89-1/31/90)
 - WWII (12/7/41-12/31/46)
 - Korea (6/25/50-1/31/55)
 - Grenada/Lebanon (8/24/82-7/31/84)
 - Persian Gulf War (8/2/90 until cessation of hostilities as determined by the US Government)

- Applicant's Relationship to the Veteran:** (Step relatives are eligible)
- Mother Daughter Granddaughter Grandmother
 - Wife Sister Great-Granddaughter 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 Officer Membership Verification _____ Date _____
Or Unit Secretary's Verification for Female Veterans Only