

Please return completed application with copy of DD214 & Annual Dues payment to:



The American Legion
Department of Washington
ATTN: 110 Membership
P.O. Box 3917
Lacey, WA. 98509-3917



First Name: _____ Middle Initial: ____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____

My annual dues of \$45.00 are paid by:

Personal Check Money Order Cashiers Check

Visa Mastercard Discover Expiration Date: _____

Card Number: _____

Charge Amount: \$45.00

Eligibility Dates:

- August 2, 1990 - Open Persian Gulf War
- Dec. 20, 1989 - Jan. 31, 1990 Panama
- Aug. 24, 1982 - Jul. 31, 1984 Grenada/Lebanon
- Feb. 28, 1961 - May 7, 1975 Vietnam War
- June 25, 1950 - Jan. 31, 1955 Korean War
- Dec. 7, 1941 - Dec. 31, 1946 World War II
- Apr. 6, 1917 - Nov. 11, 1918 World War I

Branch Of Service:

- U.S.Army
- U.S.Navy
- U.S.Air Force
- U.S.Marines
- U.S.Coast Guard

I certify that I have served at least one day of active military duty during the date(s) marked above and was honorably discharged or still serving honorably.

Signature of Applicant: _____ Date: _____