			Date	RECEIPT			
Detachment of		Squadro	on No	Birth Date			Date
				Recruited by		(Last)	Received from:
	(First)	(Initial)	(Last)		(Initial)	(Last)	
Address		(Street)	(City)	(State)	(Zip)	(Telephone)	
XX			-	. ,	(Zip)	(Telephone)	¢
(a) Abo	ove is a me	mber in good stand	tablished ling of Post No	Dep	partment of		\$
OR (b) Above is a deceased veteran who served honorably from to to							for payment
Has Appl	licant previ	ously been a memb	per of the SAL?	Wh	nere?		Squadron
I here	by subscrib	e to the Constitutio	on of the Sons of Th	ne American Legion, app	bly for membership, an	d	
Email Ad	ldress			Trans	mit \$		Detachment of
	cant or Par			Englointy certin	-		
					Online version	(2012)	
	APPLICATION FOR MEMBERSHIP Sons of The American Legion Date						DECEIDE
			501	s of the Americ	an Legion	Date	RECEIPT
Detachm	ent of	Squadro	on No	Birt	h Date		Date
Name				Recruited by		(Last)	Received from:
	(First)	(Initial)	(Last)		(Initial)	(Last)	
Address		(0,)		(0,)	(7:)		
		(Street)	(City)	(State)	(Zip)	(Telephone)	
Veteran through whom eligibility is established							\$
(b) Above is a member in good standing of Post No Department of OR (b) Above is a deceased veteran who served honorably from to (c) Relationship of Applicant to Veteran Has Applicant previously been a member of the SAL? Where?							for payment
(c) Relati Has Appl	ionship of A licant previ	Applicant to Vetera ously been a memb	oer of the SAL?	Wh	nere?		Squadron
I herel	by subscrib	e to the Constitutio	on of the Sons of Th	ne American Legion, app	ly for membership, an	d	
Email Ad	ldress			Trans	mit <u>\$</u>		Detachment of
Signed	cant or Par	ent)		Eligibility certif	fied by		
ву пррп	y Applicant or Parent) Online version (2012)						
	APPLICATION FOR MEMBERSHIP						
			Son	s of The Americ	can Legion	Date	RECEIPT
Detachm	ent of	Squadro	on No	Birt	h Date		Date
Name				Recruited by			Received from:
. tullio	(First)	(Initial)	(Last)	Recruited by	(Initial)	(Last)	Accelved from.
Address							
		(Street)	(City)	(State)	(Zip)	(Telephone)	
Veteran through whom eligibility is established							\$
(c) Above is a member in good standing of Post No Department of To Department of To							for payment
(c) Relationship of Applicant to Veteran (b) (b) (b) (c) Relationship of the SAL? (b)							Squadron
				me American Legion, app			
Email Ad	ldress			Trans	mit <u>\$</u>		Detachment of
				Eligibility certif	fied by		
	cant or Par				-		

Online version (2012)