AMERICAN LEGION AUXILIARY Girls STATE

American Legion Auxiliary

World's Largest Auxiliary Patriotic Service Organization

MEMBERSHIP APPLICATION

AMERICAN LEGION AUXILIARY Girls NATION

APPLICANT INFORMATION

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

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Email Address _____

Date of Birth *(Required)* ___/___/___ ❑ 17 and Under ❑ 18 and Over

Unit # 927

Location Gilbert, PA

Previous Unit City/State *(If Applicable)* _____ ALA ID # (if known) _____

Signature of Applicant *(or legal guardian if under 18)* _____ Date ___/___/___

$35 Dues

(Junior Member Dues: $8)

ELIGIBILITY INFORMATION

Eligible Through—Name of Veteran *(Female Veterans: List Your Own Name)* _____

If Living: American Legion Member ID # _____ Post # _____ City _____ State _____

❑ Deceased—If veteran is deceased, contact ALA unit about the necessary military records.
For Veteran's DD214 Discharge Papers: www.archives.gov/veterans/military-service-records

Veteran Served:

❑ WWI (4/6/1917-11/11/1918)

❑ Anytime After 12/7/1941 (check all that apply):

❑ Global War on Terror ❑ Panama ❑ Vietnam ❑ WWII
❑ Gulf War ❑ Lebanon/Grenada ❑ Korea ❑ Other Conflicts

Applicant's Relationship to the Veteran:

❑ Male Spouse ❑ Female Spouse ❑ Mother ❑ Grandmother ❑ Sister ❑ Self
❑ Daughter ❑ Granddaughter

To Be Completed By The American Legion Post Adjutant/Officer

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 Adjutant/Officer Membership Verification _____ Date ___/___/___

Questions?
CONTACT: AUX Membership Chair
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