

AMERICAN LEGION AUXILIARY – MEMBERSHIP APPLICATION

Application Information

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

Address

City State Zip

Home Phone Cell Phone

Email Address Unit # and Location

Date of Birth (Required) Birth - 17 18 and over

Have you been a member before? Yes No

Signature of Applicant (or legal guardian if under 18)

Mail completed application with dues of \$27.50 for 18 and over or \$4.25 for Birth to 17

The American Legion Hillsboro Post No. 6 285 W. Main St. Hillsboro, OR 97123

Eligible Through - Name of Veteran (if living, must be American Legion member) Living Deceased

American Legion Member ID Number

Veteran's American Legion Post Name Post # City State

Veteran Served: (check all that apply)

- WWI (4/6/17 - 11/11/18) WWII (12/7/41 - 12/3/46)
Merchant Marines (12/7/41 - 12/31/46) Korea (6/25/50 - 1/31/55)
Vietnam (2/28/61 - 5/7/75) Lebanon/Grenada (8/24/82 - 7/31/84)
Panama (12/20/89 - 1/31/90) Gulf War/War on Terrorism (8/2/90 until cessation of hostilities)

Applicant's Relationship to the Veteran:

- Mother Wife Daughter Sister
Grandmother Granddaughter Great-Granddaughter Self

I certify that the above named individual served at least one day of active duty during the dated marked above and was honorably discharged or is still serving honorably.

Post Adjutant /Officer Membership Verification Date