

# Sons of The American Legion Membership Application

Detachment of MI Squadron No. 49 Birth Date \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Recruited by JIM MONTGOMERY  
(First) (Initial) (Last) (Initial) (Last)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

E-mail Address \_\_\_\_\_ Telephone \_\_\_\_\_

Veteran through whom eligibility is established \_\_\_\_\_

(a) Above is a member in good standing of Post No \_\_\_\_\_, Dept. of \_\_\_\_\_

OR (b) Above is a deceased veteran who served honorably from \_\_\_\_\_ to \_\_\_\_\_

(c) Relationship of Applicant to Veteran \_\_\_\_\_

I hereby subscribe to the Constitution of the Sons of The American Legion, apply for membership, and transmit \$ 30.00 as annual membership dues.

Signed \_\_\_\_\_  
(By Applicant or Parent)

Eligibility certified by \_\_\_\_\_

(Post Adjutant)

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