

The American Legion Synepuxent Post 166 Membership Application



LEGION ACT 2019

(Name) (Phone)

(Mailing Address) (Date)

(City) (State) (Zip)

(Email) Male Female _____
(Gender) (Birth Date)

I Certify that I served at least one day of active military duty since December 7, 1941 and was honorably discharged or am still serving honorably .

Please check appropriate eligibility dates and branch of service below

- | | | |
|---|--|---|
| <input type="checkbox"/> Global War on Terror | <input type="checkbox"/> Vietnam | <input type="checkbox"/> U.S Army |
| <input type="checkbox"/> Gulf War | <input type="checkbox"/> Korea | <input type="checkbox"/> U.S Navy |
| <input type="checkbox"/> Panama | <input type="checkbox"/> WWII | <input type="checkbox"/> U.S Air Force |
| <input type="checkbox"/> Lebanon/Grenada | <input type="checkbox"/> Other Conflicts | <input type="checkbox"/> U.S Marines |
| | | <input type="checkbox"/> U.S Coast Guard |
| | | <input type="checkbox"/> U.S Merchant Marines (WWII only) |

(signature of applicant) (Date) (Name of recruiter)

Note: Dues are \$35.00 a year

DD-214 - yes____ No____