



## **SONS OF THE AMERICAN LEGION**

Madera Post #131

249 Esperanza Blvd.

Green Valley, AZ 85614

### **APPLICATION FOR MEMBERSHIP**

**DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY/STATE/ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

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

Above individual is a member in good standing of Post# \_\_\_\_\_

Department of: \_\_\_\_\_

OR Above is a deceased veteran who served honorably from: \_\_\_\_\_ to \_\_\_\_\_

Your relationship to above named 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.

**SIGNATURE:** \_\_\_\_\_

**ELIGIBILITY CERIFIED BY:** \_\_\_\_\_