

Veteran of Wartime Service!





We notice by your license plate or bumper sticker that you are a veteran of military service. Perhaps you are already a member of The American Legion, but if not and you served during a wartime era, we would like to extend to you an opportunity to become a member of this growing, community centered Organization.

The American Legion is an organization of veterans serving other veterans, their families, and the communities they live in. We are **the** voice of the veteran in Washington DC fighting for the benefits and rights of all those who served our Country in the Armed Forces. Commander _____ would be pleased to have you as a member of this growing, community based Veterans' Organization.

Below is a current membership application. If you are interested in becoming a member or would like more information please call. Or you may use this application and mail a check for \$_____ . ____ payable to "_____." **Please Print** and include your phone number. Your membership card will be mailed to you and you'll be contacted when the next post meeting is held.

The American Legion Membership Application

The American Legion Membership Application			
_____ (Name)		_____ (Phone)	
_____ (Mailing Address)			_____ (Date)
_____ (City)	_____ (State)	_____ (Zip)	_____ (Post #)
Please check appropriate eligibility dates and branch of service below <input type="checkbox"/> Aug. 2, 1990-cessation of hostilities as determined by U.S. Govt. <input type="checkbox"/> Dec. 20, 1989-Jan. 31, 1990 <input type="checkbox"/> Aug. 24, 1982-July 31, 1984 <input type="checkbox"/> Feb. 28, 1961-May 7, 1975 <input type="checkbox"/> June 25, 1950-Jan. 31, 1955 <input type="checkbox"/> Dec. 7, 1941-Dec. 31, 1946 <input type="checkbox"/> April 6, 1917-Nov. 11, 1918 <input type="checkbox"/> Merchant Marines 12/7/41-8/15/45 (only eligibility)			_____ (Dues)
<input type="checkbox"/> U.S. Army <input type="checkbox"/> U.S. Navy <input type="checkbox"/> U.S. Air Force <input type="checkbox"/> U.S. Marines <input type="checkbox"/> U.S. Coast Guard			
I certify that I served at least one day of active military duty during the dates marked above and was honorably discharged or am still serving honorably.			
_____ Signature of applicant		_____ Name of recruiter	

 Receipt of Dues (Please Print)
From _____ \$ _____ for 20 _____ Post # _____ Recruiter's Name _____ Recruiter's Signature _____ Recruiter's Phone # _____


Mail to:
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5400 E. Yale Ave
Denver, CO 80222-6905
Office: 303-757-1919
 Lounge: 303-756-8922
 Website: www.lcwpost1.org

