



American Legion Auxiliary

APPLICATION FOR MEMBERSHIP

Please type or print

Applicant's Full Name (First, MI, Last)

Senior (over 18) Junior (birth-18)

Mailing Address (City, State, ZIP)

Work/Home Phone Number (Unit Number & Location)

I am eligible for membership through the military service of (FullName)

Living/Deceased He/She is a member of: (American Legion Post, Post #, City, State)

The veteran, Living or Deceased, served in: WWI, WWII, Merchant Marines, Korea, Vietnam, Grenada/Lebanon, Panama, Persian Gulf War

Applicant's Relationship to the Veteran: Mother, Grandmother, Wife, Granddaughter, Sister, Great-Granddaughter, Daughter, Self

I certify that the above named individual served at least one day of active duty during the dates marked above and was honorably discharged. Signature of Applicant, Post Officer Membership Verification, Or Unit Secretary's Verification for Female Veterans Only

Mail completed application directly to the nearest local California unit, along with a copy of the DD214* for the person through which you are eligible. The Department Headquarters or Unit will advise you of the dues amount required. To find a local unit, click here.

*Veteran's Service Record Information

The National Personnel Records Center maintains records from all branches of the military on individuals who are discharged, retired, or deceased.

All requests must be written, signed and dated. You may download the Standard Form 180, Request Pertaining to Military Records, from their Web site. FAX number to submit a SF 180 is (314) 538-4175.

Information on how to make a request, what information needed to identify a record, and a request form can be found on Web site at http://www.nara.gov/regional/mprsf180.html

For a quick response to your questions, please contact center@stlouis.nara.gov than through the following customer service telephone numbers listed below, which receive thousands of calls per day.

National Military Personnel Records Center 9700 Page Blvd. St. Louis, MO 63132