



Membership application – mail completed application with proof of eligibility (DD-214) to:

The American Legion Department of SC

103 Legion Plaza Road

Columbia, SC 29210

First Name \_\_\_\_\_ Middle Initial \_\_\_\_ Last Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

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

My annual dues of \$55.00 are enclosed- Ck or MO # \_\_\_\_\_

### Eligibility Requirements for American Legion Membership

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.

Eligibility Dates:

Branch of Service

- Global War on Terror
- Gulf War
- Panama
- Lebanon/Grenada
- Vietnam
- Korea
- WWII
- Other Conflicts

- U.S. Army
- U.S. Navy
- U.S. Air Force
- U.S. Marines
- U.S. Coast Guard
- U.S. Merchant Marines (12/7/41-12/31/46)

I would like to be assigned to an American Legion Post nearest my home.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_