



AMERICAN LEGION POST 18-PORTSMOUTH, RI MEMBERSHIP APPLICATION

I certify that I served at least one day of active military service during the dates marked below and that I was _____ honorably discharged or that I am _____ still serving honorably. (Please attach copy of DD-214 or comparable documentation.)

DATES OF SERVICE FALLS BETWEEN (CHECK ALL THAT APPLY):

_____ DEC 7, 1941—PRESENT

_____ US MERCHANT MARINE
DEC 7, 1941—DEC 31, 1946

BRANCH OF SERVICE:

_____ U.S. AIR FORCE

_____ U.S. ARMY

_____ U.S. COAST GUARD

_____ U.S. MARINE CORPS

_____ U.S. NAVY

_____ U.S. MERCHANT MARINE

_____ U.S. SPACE FORCE

CHECK US OUT ON THE WEB!
WWW.ALPOST18RI.HOMESTEAD.COM

NAME: _____

MAILING ADDRESS: _____

CITY: _____ **ST:** _____ **ZIP CODE:** _____

(optional)

PHONE: (_____) _____ - _____ **DATE OF BIRTH:** ____ / ____ / ____

(optional)

E-MAIL: _____ @ _____

SIGNATURE: _____ **DATE:** ____ / ____ / 202__

**PLEASE MAIL COMPLETED FORM ALONG WITH CHECK FOR DUES IN THE AMOUNT OF \$35 PAYABLE TO LEGION HOME INC. TO:
AMERICAN LEGION POST 18, PO BOX 307, PORTSMOUTH, RI 02871
(OR DIRECTLY TO MEMBERSHIP CHAIRMAN IN PRE-ADDRESSED ENVELOPE)**

PLEASE DO NOT WRITE BELOW THIS LINE

RECRUITED BY: _____

ELIGIBILITY CONFIRMED BY: _____, POST 18 ADJUTANT

FORWARDED TEMPORARY CARD TO MEMBER ON: ____ / ____ / 202__, BY MEMBERSHIP CHAIR

MAILED TO THE DEPT OF RI ADJUTANT W/DUES ON: ____ / ____ / 202__, BY POST 18 ADJUTANT

NOTE: RETAIN COPY FOR POST 18 RECORDS