

THE AMERICAN LEGION



Mail completed application and a copy of your DD214 with payment to:

The American Legion
Department of Florida
Sauls-Bridges Post #13
PO Box 38028
Tallahassee, FL 32315-8028

Please print and complete the appropriate entries:

First Name: _____ Middle Initial: _____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____

My annual dues of \$25.00 are paid by:

Personal Check

Money Order

Cashiers Check

Eligibility Dates:

- August 2, 1990 - Open Persian Gulf War
- Dec. 20, 1989 - Jan. 31, 1990 Panama
- Aug. 24, 1982 - Jul. 31, 1984 Grenada/Lebanon
- Feb. 28, 1961 - May 7, 1975 Vietnam War
- June 25, 1950 - Jan. 31, 1955 Korean War
- Dec. 7, 1941 - Dec. 31, 1946 World War II
- Apr. 6, 1917 - Nov. 11, 1918 World War I

Branch Of Service:

- U.S.Army
- U.S.Navy
- U.S.Air Force
- U.S.Marines
- U.S.Coast Guard

The paid membership period is: July 1 - June 30

I certify that I have served at least one day of active military duty during the date(s) marked above and was honorably discharged or still serving honorably.

Signature of Applicant _____ Date: _____