



Please Return Completed Application to: The American Legion Post 338
Membership Application
860 State Route 36,
Leonardo, NJ 07737

The American Legion Membership Application

YES! I'll help my fellow veterans by becoming a member of the American Legion Post 338. I certify that I severed at least one day of active military duty during the dates marked below and was honorable discharged or am still severing honorable.

Date of Service	Branch of Service
<input type="checkbox"/> Aug 2, 1990-open	<input type="checkbox"/> U.S. ARMY
<input type="checkbox"/> Dec 20, 1989 – Jan31, 1984	<input type="checkbox"/> U.S. NAVY
<input type="checkbox"/> Aug 24, 1982 – July 31, 1984	<input type="checkbox"/> U.S. AIR FORCE
<input type="checkbox"/> Feb 28, 1961 – May 7,1975	<input type="checkbox"/> U.S. MARINES
<input type="checkbox"/> Dec 7, 1941 – Dec 31, 1946	<input type="checkbox"/> U.S. COAST GAURD
<input type="checkbox"/> Apr 6, 1917 – Nov 11, 1918	
<input type="checkbox"/> U.S. Merchant Marine Dec 7, 1941 – Dec 31, 1946	

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-Mail: _____

Birthday Date: _____

Signature: _____

Please tell us how / where you heard about The American Legion and if you have any questions: