

$\label{lem:membership} \textbf{Membership application} - \textbf{mail completed application with proof of eligibility (DD-214) to:}$

The American Legion Post 111

P.O. Box 1815

Conway, SC 29526

First Name		Middle Initial	_ Last Name_			_
Mailing Address						_
City		State_		_Zip		
Home Phone #			Cell Phone #			
E-mail Address						_
My annual dues of \$60.00 is enclosed- Ck or MO #						
Eligibility Requirements for American Legion Membership						
If you are currently on active duty, serving the United States honorably, anywhere in the world, or have served honorably during any of the following eligible war eras, we invite you to become a member of The American Legion.						
Eligibility Dates:				Branch of Service		
	April 6, 1917 to Nov. 11, 1918	(World War I)			U.S. Army	
	Dec. 7, 1941 to Dec. 31, 1946	(World War II)			U.S. Navy	
	June 25, 1950 to Jan. 31, 1955	i (Korean War)			U.S. Air Force	
	Feb. 28, 1961 to May 7, 1975 (Vietnam War)			U.S. Marines	
	Aug. 24, 1982 to July 31, 1984	(Lebanon / Grenada)			U.S. Coast Guard	
	Dec. 20, 1989 to Jan. 31, 1990	(Panama)			U.S. Merchant Marines (12	2/7/41-12/31/46
	Aug. 2, 1990 to today (Gulf Wa	r / War On Terrorism)				
I certify that I have served at least one day of active military duty during the era marked above and was honorably discharged or am still serving honorably						
I would like to be assigned to an American Legion Post nearest my home.						
Signature of applicant Date						