



The American Legion Post 176 Springfield

New Member / Transfer Application

Name: _____

Address: _____

City: _____ State _____ Zip _____

Tel: _____ E-mail: _____ Birth date: ____ / ____ / ____

(mm / dd / yyyy)

Branch of Service: Air Force Army Coast Guard Marines Navy

Era: Mark the appropriate box with an "X". if more than one applies, please mark only the earliest war era served:

- | | | | |
|---------------------------------------|------------------------------------------|------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Persian Gulf | <input type="checkbox"/> Panama | <input type="checkbox"/> Granada/Lebanon | <input type="checkbox"/> Vietnam |
| <input type="checkbox"/> Korea | <input type="checkbox"/> Merchant Marine | <input type="checkbox"/> WW II | <input type="checkbox"/> Legion Act of 2019 |

*** I certify that I served at least one day of federal active military duty during the dates marked above and was honorably discharged or am still serving honorably.**

NEW MEMBER:

(Verification of DD 214 or Military ID is required for membership*)

_____	_____
Name of Sponsor	Signature of applicant
New Member is paying dues of \$40.00 with:	*verified by _____

Transferring Member: FROM MEMBERSHIP CARD

Previous Post (State and Post #) _____ **Mbr #** _____ **PUFL?** Yes No

Continuous Years _____ **for Member Year** _____ **verified by** _____

Member is paying renewal dues (if expiring) of \$40.00 with: CASH Check# _____

- Please make checks payable to: The **American Legion Post 176**, (\$40.00 annual dues). Applications may be
- hand delivered** to 6520 Amherst Avenue, Springfield, VA.,
- or mailed** to PO. BOX 689, Springfield, VA 221500689 or **returned** to sponsor.

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Listed below are just a few of the many programs that Post 176 Springfield sponsors
Please check the one(s) that you are interested in supporting

- | | | | |
|---------------------------------------------------|-------------------------------------------|-------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> VA Hospital volunteering | <input type="checkbox"/> Young Marines | <input type="checkbox"/> Boys State | <input type="checkbox"/> VA Claims processing |
| <input type="checkbox"/> Veteran's Programs | <input type="checkbox"/> Legion Baseball | <input type="checkbox"/> Post improvement/maintenance | |
| <input type="checkbox"/> Membership recruiting | <input type="checkbox"/> Public Relations | <input type="checkbox"/> Social Media/Marketing | |
| <input type="checkbox"/> Flag Retirement | <input type="checkbox"/> Blood Drives | <input type="checkbox"/> Legion Riders | |

Other/Skill set: _____

Wife interested in the Auxiliary _____ Son interested in the Sons of The American Legion

name

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NEW MEMBER KEEP THIS RECEIPT FOR USE AS A TEMPORARY CARD UNTIL OFFICIAL CARD IS RECEIVED
Receipt of American Legion dues in the amount of \$ 40.00 for calendar year 2021

Received from: _____ Date: _____

Sponsor's Name: _____ Sponsor's Signature: _____