



Please return completed application to: The American Legion  
 Pearce-Keller Post 17  
 114 McCall Rd  
 Manhattan, KS 66502-5026

# THE AMERICAN LEGION MEMBERSHIP APPLICATION

**YES!** I'll help my fellow veterans by becoming a member of The American Legion. I certify that I served at least one day of active military duty during the dates marked below and was honorably discharged or am still serving honorably.

**Please check method of payment:**

- My \$45.00 check or money order is enclosed.
- Bill my credit card for \$47.00. (See box at right)  
(\$2.00 Processing Fee)

<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> VISA
ACCOUNT #	
<input type="text"/>	
EXPIRATION DATE	
<input type="text"/>	
3 Digit Code on the back	
<input type="text"/>	

**Please check applicable "Dates of Service" and "Branch of Service": (Both are required information)**

\* Indicates required information. Email for monthly newsletter and activity announcements

DATES OF SERVICE	BRANCH OF SERVICE
<input type="checkbox"/> AUG. 2, 1990 – OPEN	<input type="checkbox"/> U.S. ARMY
<input type="checkbox"/> DEC. 20, 1989 – JAN. 31, 1990	<input type="checkbox"/> U.S. NAVY
<input type="checkbox"/> AUG. 24, 1982 – JUL. 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"/> JUNE 25, 1950 – JAN. 31, 1955	<input type="checkbox"/> U.S. COAST GUARD
<input type="checkbox"/> DEC. 7, 1941 – DEC. 31, 1946	
<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

BIRTH DATE \*

SIGNATURE \*

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



**Receipt of Dues**  
 (Please Print)

Applicant: \_\_\_\_\_

\$45.00 for year 2017 Pearce-Keller Post #17

Recruiter's Name \_\_\_\_\_

Recruiter's Signature \_\_\_\_\_

Recruiter's Phone # \_\_\_\_\_