

Please return the completed application to:



The American Legion David Ketchum Post 115
PO Box 625
Ketchum, ID 83340

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 send me my current membership card.

Please enclose a check in the amount of **\$40.00** for your annual dues, along with a copy of your DD214 (if available).

Please check applicable "Dates of Service" and "Branch of Service":

War Era:	Branch of Service:
<input type="checkbox"/> WWII	<input type="checkbox"/> USA
<input type="checkbox"/> Korea	<input type="checkbox"/> USMC
<input type="checkbox"/> Vietnam	<input type="checkbox"/> USN
<input type="checkbox"/> Lebanon/Grenada	<input type="checkbox"/> USAF
<input type="checkbox"/> Panama	<input type="checkbox"/> USCG
<input type="checkbox"/> Gulf War	<input type="checkbox"/> USMM (WWII Only)
<input type="checkbox"/> Global War on Terror	
<input type="checkbox"/> Other Conflicts	

GENDER: Male Female

Name _____

Mailing Address _____

City, State, Zip code _____

Phone Number(s) _____

Email Address _____

Date of Birth _____ Service Serial Number _____

Place and Date of Entry _____

Place and Date of Separation _____

Signature _____

Spouse's Name _____

Please tell us how/when you heard about The American Legion: