



## AMERICAN LEGION POST 63 MEMBERSHIP APPLICATION

PLEASE RETURN COMPLETED APPLICATION TO:

American Legion Post 63  
Attn: Post 63 Membership  
P.O. Box 531  
Cape Girardeau, MO 63702-0531

**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.**

My \$30.00 check or money order is enclosed.

Name

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	First Name	MI	Last Name
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Address

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City, State, Zip

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Birth Date

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Phone Number

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Signature

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	First Name	MI	Last Name
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Please check applicable "Dates of Service" and "Branch of Service"

- ( ) U.S. MERCHANT MARINE – DEC. 7, 1941 – AUG. 15, 1945
- ( ) U.S. ARMY
- ( ) U.S. NAVY
- ( ) U.S. AIR FORCE
- ( ) U.S. MARINES
- ( ) U.S. COAST GUARD
- ( ) AUG 2, 1990 – OPEN
- ( ) DEC. 20, 1989 – JAN. 31, 1990
- ( ) AUG. 24, 1982 – JUL. 31, 1984
- ( ) FEB. 28, 1961 – MAY 7, 1975

- ( ) JUNE 25, 1950 – JAN. 31, 1955
- ( ) DEC. 7, 1941 – DEC. 31, 1946
- ( ) APR. 6, 1917 – NOV. 11, 1918

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

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