AMERICAN LEGION AUXILIARY
MEMBER DATA FORM

Member ID # ___________________________ Date ____________________
(Required for all changes)

Department ___________ Unit # ___________
Name ___________________________________________

_____ SR _____ JR _____ DECEASED, date of death _____/_____/
Name ___________________________________________
_____ VIM _____ Honorary Life Member
Name ___________________________________________
_____ Life Member (Depts. of CO, ND, SD ONLY)
Name ___________________________________________

CORRECTIONS

<table>
<thead>
<tr>
<th>Old Information</th>
<th>New Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Name</td>
</tr>
<tr>
<td>Former Address</td>
<td>New Address</td>
</tr>
<tr>
<td>Former City</td>
<td>New City</td>
</tr>
<tr>
<td>Former State</td>
<td>New State</td>
</tr>
<tr>
<td>Former Zip</td>
<td>New Zip</td>
</tr>
<tr>
<td>Former Telephone</td>
<td>New Telephone</td>
</tr>
</tbody>
</table>

UNIT TRANSFERS

PREVIOUS Unit # _______ Department ___________ Date ___________

NEW Unit # _______ Department ___________ Date ___________
Signature – Member (Required)
Signature – New Unit Officer (Required)

ADDITIONAL INFORMATION

Marital Status: _____Married _____Single _____Widowed _____Divorced

Continuous Years of Membership ___________________________ for ___________________________ (Paid Year)

Email address __________________________________________

WAR ERA OF ELIGIBILITY (The Veteran, living or deceased, served in):


_____ Vietnam (2/28/61 – 5/7/75) _____ Grenada, Lebanon (8/24/82 – 7/31/84) _____ Panama (12/20/89 – 1/31/90)

_____ Merchant Marines (12/7/41 – 8/15/45 Only Eligibility)

_____ Persian Gulf War (8/2/90 – Cessation of hostilities, as determined by the U.S. Government)

BRANCH OF SERVICE OF ELIGIBILITY (The Veteran, living or deceased, served in):