

# AMERICAN LEGION POST 13 APPLICATION FOR MEMBERSHIP

Please complete the application and bring/mail your DD214, along with payment to:

Sauls-Bridges Post 13 American Legion  
229 Lake Ella Drive  
Tallahassee, FL 32303  
(850) 222-3382

Please print and complete the appropriate entries:

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) - Cell Phone: ( ) -

Membership ID# (transfer or previous member): \_\_\_\_\_

Email: \_\_\_\_\_@\_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Next of Kin: \_\_\_\_\_ Phone: ( ) -

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Annual Dues of \$35 are paid by:

Online  Check  Cash

DD214 Verified by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Branch of Service: U.S. Army  U.S. Air Force  U.S. Navy  U.S. Marine Corps

U.S. Coast Guard  U.S. Space Force  Conflict: \_\_\_\_\_

I certify that I have served at least one day of active military duty and was honorably discharged or still serving honorably.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_