

# APPLICATION FOR MEMBERSHIP

## Sons of The American Legion

Detachment of Alabama Squadron No.: 555 Post: Matthew Blount Post 555

Birth Date \_\_\_\_\_  
Date \_\_\_\_\_

### Received from:

Name (First) \_\_\_\_\_ (Initial) \_\_\_\_\_  
(Last) \_\_\_\_\_

**Recruited by:** (First) \_\_\_\_\_ (Initial) \_\_\_\_\_  
Last) \_\_\_\_\_ **Address :**

Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
\_\_\_\_\_ Veteran through whom eligibility is  
established

(a) Above is a member in good standing of Post No. \_\_\_\_\_  
Department of \_\_\_\_\_ OR

(b) Above is a deceased veteran who served honorably from  
\_\_\_\_\_ to \_\_\_\_\_

Relationship of Applicant to Veteran  
\_\_\_\_\_  
\_\_\_\_\_

Has Applicant previously been a member of the SAL?  
\_\_\_\_\_ Where? Department \_\_\_\_\_  
Post \_\_\_\_\_

I hereby subscribe to the Constitution of the Sons of The American Legion, apply for membership, and pay \$20 as annual dues.

Email Address \_\_\_\_\_  
Signed \_\_\_\_\_  
Eligibility certified by \_\_\_\_\_  
By Applicant or Parent) \_\_\_\_\_  
Date \_\_\_\_\_ RECEIPT \$20.00 for payment of Annual Dues  
Squadron 555  
\_\_\_\_\_

**This is what you need to do to join the American Legion  
Matthew Blount Squadron 555 Sons of American Legion.**

1. Complete application form
3. Check for \$20 for new members payable to:  
"American Legion Post 555"
4. Either mail the form and membership fee or bring to the  
next meeting on the first Thursday of each month at 1900  
hours at Pelham Senior Center ,50 Racquet Club Parkway  
or Mail to:  
***American Legion -Sons of American Legion-  
P.O.Box 97, Pelham, AL 35124***
5. Additional questions please call 205-222-4495 or email:  
sons555ala@alpost555.com