# SONS OF THE AMERICAN LEGION
# MEMBER DATA FORM

(Please use ink and print clearly using UPPERCASE letters)

Date ____________________

Member ID # (9-digit) ☐☐☐☐☐☐☐☐☐ Detach. ☐☐ Sqdn # ☐☐☐☐

Alpha Code

Name

☐☐☐☐☐☐☐☐☐☐☐ ☐ ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐

(First) (MI) (Last) (Suffix)

## MEMBERSHIP RECORD CHANGE

☐ **Deceased**

**Name Correction**

☐☐☐☐☐☐☐☐☐☐☐ ☐ ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐

(First) (MI) (Last) (Suffix)

**New Address**

Line 1 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Line 2 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

City ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ State ☐☐ Zip Code ☐☐☐☐☐

**Telephone #** ☐☐☐ - ☐☐☐ - ☐☐☐☐

**Date of Birth:** ☐☐ - ☐☐ - ☐☐☐☐ **Cont. Years Mbsp:** ☐☐ **for** ☐☐☐☐

Month Day Year (4-digit) # Years Paid Mbsp Year

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Transferring from: Detachment (Alpha Code) ☐☐ Former Squadron # ☐☐☐☐

Transferring to: Detachment (Alpha Code) ☐☐ New Squadron # ☐☐☐☐

Applicant is ☐Son ☐ Adopted Son ☐Stepson ☐Grandson of ______________________________, who is (a) a member in good standing of Post # ______ in the Department of ____________________; or (b) a deceased veteran who served honorably during the period ________________ through ________________.

*Entry Date* *Discharge Date*

______________________________
Signature - Post/Sqdn Adjutant
***(Required for Transfer, Deceased and Cont. Years changes)***

______________________________
Signature - Member/Guardian
***(Required for Transfer)***

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**SEE INSTRUCTIONS ON REVERSE SIDE**

Form No. 00-007 (2001)

National Headquarters Copy