



The American Legion – Membership Application
For Argonne Post 56, Sherwood, Oregon

Please print clearly

Name (First) (M. Initial) (Last)

Mailing Address (Street) (City) (State) (Zip)

Phone: Home Cell

Email address

Date of Birth Date of Membership Application

Eligibility Requirements: If you have served at least one day of active military duty since December 7, 1941 and were honorably discharged or you are still serving active military duty honorably, you are eligible for membership with The American Legion.

I certify that I meet the Eligibility Requirements stated above (initial). To join the American Legion, you must provide a copy of your DD-214 or another document that shows your participation in the U.S. Armed Forces.

Please check the U.S. Armed Forces service you served in.

Army Navy Airforce Marines Coast Guard National Guard Space Force

Membership Dues: 2025 dues for the Sherwood American Legion are \$50.00. To join by mail please enclose this completed form, a copy of your DD-214 or another military document, and a check to the Sherwood American Legion Post 56. Mail to: The American Legion, PO Box 532, Sherwood, OR 97140. Your membership card will be mailed to you within 30 days.

The American Legion is the nation's largest and most powerful organization of U.S. Veterans and their families. Today, it counts 2.2 million service men and women who are members of more than 13,000 American Legion Posts across the United States and beyond. Joining the American Legion allows you to visit any of these Posts, with current membership card, without any charge. You will always be greeted warmly.

Optional: I am interested in, or would like to participate in the following: Helping Veterans and their families. Involvement in youth activities, baseball, Boys State and others. Helping with computer work and IT. Helping to maintain and improve the Post building, carpentry, plumbing, electrical, painting etc. Helping with social events, help prepare and cook meals etc. Other interests:

Dues Receipt: Name of applicant

Date Amount received for 2025 dues



Recruiter's Name Recruiter's Phone

Recruiter's Signature