## South Bay Squadron 184 - Sons of The American Legion 412 South Camino Real, Redondo Beach, CA 90277 (310) 316-6718

## APPLICATION FOR MEMBERSHIP - SONS OF THE AMERICAN LEGION

Detachment of <u>California</u>	Squadron No	184	Date/	
Name:			□ Son	□ Stepson
Name:(FIRST, Middle Initial, LAST)			 □ Adopted Son	☐ Grandson
Address:				
(STREET)		(CITY)	(STATE)	(ZIP CODE)
Phone Number:				
EMAIL Address (Print Clearly):				
Name of Veteran through whom eligi	ibility is established, a	nd Branch Served U	nder:	
Above is a member, in good standing	g, of Post Number:	Dep	artment of:	
(OR) Above is a deceased veteran who served honorably from year:			to year:	
Have You Been a member before?   Yes  No If Yes: Post Number:  Department of:			Member Number:	
I hereby subscribe to the Constitution of the Sons of The American Legion, apply for membership, and transmit \$50.00 as annual Membership Dues.				
SIGNED:				
		R LEGIONNAIRE PA		
Eligibility Certified By:				
Legion or SAL Member who is recon	nmending this applica	nt:		

## MEMBERSHIP ELIGIBILITY

Sons of The American Legion members include males of all ages whose parents or grandparents served in the U.S. military and were eligible for American Legion membership. All male descendants, adopted sons and stepsons of members of The American Legion, and such male descendants of veterans who died in service during World War I, World War II, and Korean War, The Vietnam War, Lebanon, Grenada, Panama, and the Persian Gulf War, during the delimiting periods set forth in Article IV, Section 1, of the National Constitution of The American Legion, or who died subsequent to their honorable discharge from such service, shall be eligible for membership in the Sons of The American Legion.