



# APPLICATION FOR MEMBERSHIP Sons of The American Legion

Detachment of California • Squadron Petaluma 28

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

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

Address: \_\_\_\_\_ City \_\_\_\_\_ State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Veteran Name First and Last: \_\_\_\_\_

Relationship: Father/Step-Father  Mother/Step-mother  Grandparent

Great Grandparent

Service Time of Veteran: (circle) \_\_\_\_\_

World War I      Grenada

World War II      Panama

Korean War      Persian Gulf War

Vietnam War      War on Terrorism

Lebanon

**Dual Membership and Squadron**

Joining Riders

Legion

**Membership Dues**

Membership Yearly Dues: \$15.00

Dual Membership: \$10.00

\_\_\_\_\_  
Signed by Applicant or Parent

\_\_\_\_\_  
Edibility Certified by (Post/Squadron Adjutant Space)

**Mail Application and Check to**

American Legion Family 28

PO Box 618

Petaluma, CA 94953