

Application for Membership in Warrenville American Legion Post 589



NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____

EMAIL _____

DUES

\$40.00 (1 YEAR)
\$200.00 (5 YEARS)

Please include a copy of your DD-2 4 with payment to:
Warrenville American Legion Post 589
P.O. Box 1653
Warrenville, IL 60555

BRANCH(ES) OF SERVICE

- U.S. ARMY
- U.S. AIR FORCE
- U.S. COAST GUARD
- U.S. NAVY
- U.S. MARINES
- U.S. MERCHANT MARINES (12/7/41 — 8/15/45 ONLY)

ERAS SERVED

- August 2, 1990—cessation of hostilities as determined by U.S. Government
- December 20, 1989—January 31, 1990
- August 24, 1982—July 31, 1984
- February 28, 1961—May 7, 1975
- June 25, 1950—January 31, 1955
- December 7, 1941—December 31, 1946

SIGNATURE

I certify that I have served at least one day of active duty in the dates checked; and was honorably discharged or am serving honorably.

X