



(Please use ink and print clearly using **UPPERCASE** letters)

Member ID# (9-digit)			Dept.	Squadron #
First Name	MI	Last Name		Suffix

MEMBERSHIP RECORD CHANGE

Deceased
 Dual Member (Member of both Legion and SAL)
 Honorary Life Membership Code: Add Delete

NAME CORRECTION

First Name	MI	Last Name	Suffix
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NEW ADDRESS

Line 1 _____

Line 2 _____

City	State	ZIP Code
Home Phone	Cell Phone	

Member Transferring FROM:	Detachment (Alpha Code)	Former Squadron #
Member Transferring TO:	Detachment (Alpha Code)	New Squadron #

Member is a Son Adopted Son Stepson Grandson of _____, who is (A) a member of good standing of Post # _____ in the Department of _____; or (B) a deceased veteran who served honorably during the period _____ through _____.

DATE OF BIRTH

MM/DD/YYYY

CONTINUOUS YEARS OF MEMBERSHIP

# Years	Last Paid Membership Year
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EMAIL ADDRESS

Signature -- Post/Squadron Adjutant
(Required for Transfers, Deceased, Honorary Life and Cont. Years changes)

Signature -- Member/Guardian
(Required for Transfers)

SEE INSTRUCTIONS ON REVERSE SIDE

THE AMERICAN LEGION
MEMBER DATA FORM

INSTRUCTIONS

Please clearly print or type the information when filling out the form.

Information that is illegible or incomplete is subject to error. Your help in ensuring the accuracy of the information reported is appreciated and will assist National Headquarters in maintaining a more accurate database for members of The American Legion.

The Member Data Form should be used to report:

- Name/Address Changes
- Date of Birth
- Continuous Years Changes
- Post Transfers and
- Deceased Members

The Member ID No., Post No. and the name of the Department is required for a Member Data Form to be processed by National Headquarters.

The following pertains to transfers only:

The transfer from one Post to another is a privilege granted to any paid-up Legionnaire with the approval of the Post to which the member desires to transfer.

A TRANSFER MAY BE MADE UNDER THE FOLLOWING RULES:

1. No transfer shall be made unless the member requesting transfer has a membership card showing the member is in good standing at the time the transfer is requested. Members whose dues for the current calendar year are not paid by February 1 of that year are suspended, and are not in good standing, and are not eligible for transfer.
2. No charge shall be made to the member for the privilege of transfer and no dues shall be transferred from one Post to another. The accepting Post may require payment of the difference in dues on a pro-rated basis if dues are higher than the transferring member's former Post.
3. A Legionnaire desiring transfer of membership must first secure approval from the Post TO WHICH transfer is desired. This may be done orally or in writing. The Adjutant of the new Post will complete and route the parts of the form as instructed.
4. National Headquarters will carry through by transferring the member's record to the new Post, provided that member's current record is on file and provided the information on the transfer is complete.
5. Kansas Paid Life Members should check with their Department Headquarters prior to transfer.

ROUTE THE PARTS OF THE MEMBER DATA FORM AS FOLLOWS:

Parts 1-3: Send to Department Headquarters. The Department will forward part 1 to National, retain part 2, and mail part 3 to the Post that loses the member who transfers.

Part 4: Post should keep for their files.

Note: The signature of the Post Adjutant is required in reporting an Honorary Life Member, a deceased member, a transfer or a continuous years change.