Remit to:
American Legion Auxiliary
1540 Kuser Road, Suite A-8
Hamilton, New Jersey 08619
609-581-9580

AMERICAN LEGION AUXILIARY

MEMBERSHIP NEW 2018

LEGION MEMBER ID#	NAME	SR	JR	# YEARS	DUES $
		TOTALS			

ATTACH ALL MEMBERSHIP APPLICATIONS TO THIS FORM AND SEND WITH CHECK

MEMBERSHIP INVOICE KEEP ATTACHED

UNIT # ________ COUNTY DATE ____________________

SENIORS ____________________ $ Amount ____________

JUNIORS ____________________ $ AMOUNT ____________

TOTALS ____________

DUES SENIORS $15.00 JUNIORS $2.50

Make Check Payable to:
ALA Dept. of NJ