Format: mm/dd/yyyy

		<u> </u>	early using UPPERCASE letters)			
lember ID # (9-digit)			Dept.	Post #		
rst Name		MI	Last Name			Suffix
	MEME	BERSHIP	RECORD CHANGE			
Deceased	Honorary Life	Membership	Code: Add Delete			
Member above holds an elec	ted office or appoin	tment within	the Department or District			
AME CORRECTION						
rst Name		MI Last Name				Suffix
EW ADDRESS						
ne 1						
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ity				State ZIP Code		de
Home Phone			Cell Phone			
MAIL ADDRESS						
DATE OF BIRTH			CONTINUOUS YEARS OF MEMBERSHIP			
MM/DD/YYYY			# Years	Last Paid Membership Year		
Member Transferring FROM :	er Transferring FROM : Department (Alpha Code)		Former Post #	GENDER		
vicinisci Transici III g i Rom.	Department (Alpha Co	do)	New Post #	☐ Male		☐ Femal
Member Transferring TO :	Department (Alpha Co	ue)	New Post#	IVIAIE	-	☐ Femai
/AR ERA (Mark all that apply)	<u> </u>			_		
☐ Global War on Terrorism ☐ Panama			Vietnam	□ wwii		
☐ Gulf War ☐ Grenada/Lebanon		non	☐ Korea	☐ Other Conflicts		
BRANCH OF SERVICE						

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
- Email Additions or Changes
- Continuous Years Changes
- Post Transfers
- Deceased Members

The Member ID Number, Post Number 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.
- 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. Department or National Headquarters will transfer 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. No member may transfer to another post if the member has disciplinary actions within their post and this post has notified National Headquarters of the situation.

ROUTE THE MEMBER DATA FORM AS FOLLOWS:

- 1. Email copy to the department headquarters then national headquarters IT / Member Support Services (email) MSSforms@legion.org
- 2. Send copy to the transferring post
- 3. Post keeps copy 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.