



NATIONAL COMMANDER BRETT P. REISTAD
2019 MEMBERSHIP INCENTIVE PIN



Certification Form

(3) New Members or (6) Renewals

Please make sure that the address, phone number and email address provided is for the recruiter and not the post.

Date: _____

Recruiter's Name: _____

Membership ID Number: _____

Street Address or PO Box: _____

City, State, Zip: _____

Email Address: _____

Daytime Phone Number: _____

Mail to Recruiter

Mail to Post

TO QUALIFY YOU NEED TO RECRUIT (3) NEW MEMBERS INTO THE AMERICAN LEGION OR RENEW (6) MEMBERS. (A NEW MEMBER IS DEFINED AS ANY ELIGIBLE PERSON JOINING FOR THE 2019 MEMBERSHIP YEAR WHO WAS NOT A MEMBER OF THE AMERICAN LEGION DURING THE 2018 MEMBERSHIP YEAR). PLEASE FORWARD THE NAMES OF NEW SAL MEMBERS OR AUXILIARY MEMBERS TO YOUR SQUADRON OR UNIT FOR USE IN THEIR RESPECTIVE INCENTIVE PROGRAMS.

PLEASE MAKE SURE THAT THE MEMBERS HAVE BEEN PROCESSED BEFORE SUBMISSION. PINS WILL NOT BE MAILED UNTIL THEY ARE VERIFIED ON THE NATIONAL DATABASE.

(3) NEW MEMBERS:

(Include full name, department, post)

1. _____
2. _____
3. _____

(6) RENEWALS:

(Include ID number, full name, post)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Return completed forms to:
The American Legion
National Internal Affairs & Membership Division
PO Box 1055
Indianapolis, IN 46206

Fax: 317-630-1413
Email: ksingleton@legion.org