On-Line Download Mail-In Form - Post 177 Membership Application - Mail completed application to

The American Legion Post 177 Fairfax City Virginia Attn: Post 177 Membership 3939 Oak St. Fairfax Va. 22030

Please include a copy of your DD 214 (it will be returned to you)

First Name:	_ Middle Initial: L	ast Name:
Mailing Address:		
City:	State:	Zip:
Home Phone: ()		
e-mail Address:		_
Date of Birth:		
My annual dues of \$40.00 are p	_	Cashiers Check
☐ Transferring from Post no.	, City	, State
		Branch Of Service:
If you have served federal active States Armed Forces since Deconhave been honorably discharge you are eligible for membership Legion!	ember 7, 1941, and ed or are still serving	U.S. Army U.S. Navy U.S. Air Force U.S. Marines U.S. Coast Guard
		f active military duty during the arged or still serving honorably.
Signature of Applicant		Date