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:	Last Name:
Mailing Address:		
City:	State:	Zip:
Home Phone: ()		
e-mail Address:		
Date of Birth:		
	Money Order	Cashiers Check
Transferring from Post no	o, City _	, State
If you have served federal act States Armed Forces since De have been honorably discharg you are eligible for membersh Legion!	ecember 7, 1941, and ged or are still servi	u.S. Navy
		y of active military duty during the charged or still serving honorably.
Signature of Applicant		Data