

THE AMERICAN LEGION POST CHARTER NAME CHANGE FORM

APPLICATION MUST BE SENT THROUGH STATE AMERICAN LEGION DEPARTMENT OFFICE

WAIL.	
THE AMERICAN LEGION	
ATTN: CHARTERS	
PO BOX 1055	

INDIANAPOLIS, IN 46206-1055

EMAIL: IA@legion.org

Data	•
Daic	

Date Format: mm/dd/yyyy

(select date by clicking inside box)

TO: INTERNAL AFFAIRS & MEMBERSHIP DIVISION

FROM: DEPARTMENT OF

Post No: SAL Squadron YES **OR** NO

Old Name of Post:

New Name of Post:

REQUIRED PAPERWORK TO ATTACH: POST MEETING MINUTES **OR** POST RESOLUTION

[ONLY ONE (1) OPTION REQUIRED]

COMMENTS:

NOTE: If a post is being named after a deceased individual, a consent or permission letter from a family member must be provided. Any applicable replacement charter(s) will be created and sent to the Department (state) American Legion department headquarters office for endorsing signatures and processing.

If the Post has an SAL Squadron, the squadron name will also be changed by default.

Contact information for the American Legion Department state headquarters offices can be found on our website by clicking here https://www.legion.org/about/organization/departments

This section to be completed by The American Legion National Headquarters Staff only:

PERMANENT CHARTER DATE:

NAME CHANGE DATE:

EIN / TAX ID#:

REVISED: DEC / 2025