





**SUBMIT ELECTRONICALLY TO:**

(Please use ink and print clearly using **UPPERCASE** letters)

[MSSforms@legion.org](mailto:MSSforms@legion.org)

Member ID# (9-digit)		Dept.	Squadron #
First Name	MI	Last Name	Suffix

**MEMBERSHIP RECORD CHANGE**

Deceased

Honorary Life Membership Code:  Add  Delete

Dual Member (Member of both The American Legion and SAL)

<b>NAME CORRECTION</b>			
First Name	MI	Last Name	Suffix

<b>NEW ADDRESS</b>		
Line 1		
Line 2		
City	State	ZIP Code
Home Phone	Cell Phone	

Member Transferring <b>FROM:</b>	Detachment (Alpha Code)	Former Squadron #
Member Transferring <b>TO:</b>	Detachment (Alpha Code)	New Squadron #

Member is a  Son  Grandson of  Great-Grandson of \_\_\_\_\_,

who is (A) a member of good standing of Post \_\_\_\_\_ in the Department of \_\_\_\_\_; or (B) a

deceased veteran who served honorably during the period \_\_\_\_\_ through \_\_\_\_\_.  
(select date from drop-down menu by clicking inside above box) (select date from drop-down menu by clicking inside above box)

<b>DATE OF BIRTH</b>
MM/DD/YYYY

(select date from drop-down menu by clicking inside above box)

<b>CONTINUOUS YEARS OF MEMBERSHIP</b>	
# Years	Last Paid Membership Year

(select date from drop-down menu by clicking inside above box)

<b>EMAIL ADDRESS</b>

\_\_\_\_\_  
Signature – Post/Squadron Adjutant  
(Required for Transfers, Deceased, Honorary Life and Cont. Years changes)

\_\_\_\_\_  
Signature – Member/Guardian  
(Required for Transfers)

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**Post File  
(for Post/Squadron gaining member)**