



THE ROYAL CANADIAN LEGION APPLICATION FOR MEMBERSHIP

Command Alberta / NWT Branch Name General Stewart Branch No. 4 Page 1

Branch Address 324 Mayor Magrath Drive South, Lethbridge, AB T1J 3L7

Applicant's Name: Mr. / Mrs. / Ms _____
Surname _____ Given Names _____

Address: _____
Street / PO Box / RR # / Site # _____ City _____ Prov _____ Postal Code _____

Phone No: (Home) _____ (Cell) _____ E-Mail _____

Date of Birth: _____ Place of Birth: _____ Citizenship: _____
DD/MM/YYYY

Gender: Male / Female Occupation: _____ Next of Kin: _____

I am interested in the following BRANCH COMMITTEES: (Circle all that Apply)
Finance / Membership / Poppy / Sportas / Poster & Literacy / Remembrance / Decorating / Special Events

I am interested in the following BRANCH ACTIVITIES : Darts / Pool / Cribbage / Euchre / Shuffleboard / Poker

Privacy Statement for The Royal Canadian Legion

The Royal Canadian Legion, does not rent or sell the names of members to any organization or advertiser. On occasion, Dominion Command may provide a Partner in the Member Benefits Package Program with members' names and addresses to advise them of products and services being offered. Most members appreciate such special services. You are required to give your consent, or otherwise, to this procedure.

I consent ☐ I do not consent ☐ to my name and address being provided for the Member Benefits Package Program.

The purposes and objects of the Legion are to constitute an association of those who have served or are serving in Her Majesty's armed forces or any auxiliary force and others who support the purposes and objects of the Legion. The Legion shall stand for strong and united comradeship among all members and those that have served or are serving, so that their rights nor their interests are forgotten, and that their welfare and that of their dependants, especially the dependents of the disabled, the sick, the aged and the needy may always be safeguarded. The Legion shall encourage, promote, and engage in or support all forms of national, provincial, municipal or community service, or any charitable purpose. Having read the purposes and objects of this great organization, are you prepared to subscribe to them and labour to advance the Legion's cause, including active participation in Poppy campaigns? Initials _____

I hereby certify that I have never been dishonourably discharged from, deserted from nor evaded service in the Forces of any country.

I hereby solemnly declare that I am not a member of, nor affiliated with, any group, party or sect whose interests conflict with the avowed purposes of the Legion, and I am not a communists, fascist or anarchist, and do not and will not, support any organization advocating the overthrow of our government by force or which advocates, encourages or participates in subversive action or propaganda.

I hereby certify to the correctness of all the particulars contained herein and make application for membership in and agree to abide by the constitution, rules and by-laws of The Royal Candian Legion.

I hereby agree to participate in The Royal Canadian Legion's iniation ceremony, which shall include a declaration of loyalty to the Sovereign and Canada and obedience to the General By-laws.

I do not wish to receive a copy of the Legion Magazine _____
Initials

Applicant's Signature : _____ Date: _____

Proposer's Name : _____ Proposer's Signature: _____
If none then print "Walk In" _____ Print

Record of Previous Legion Service

Command No.	Branch No.	Province	Date Joined	Date Left	Positions Held, If Any

Are you applying for other than an Affiliate Membership please fill in the appropriate section on the

Yes ☐

For an ASSOCIATE MEMBERSHIP

(Circle your selection & attach a photocopy of the supporting documents)

Proof of service in the following: Cadets / Navy League / Fire Services / Polish Forces

OR they are a : Child / Parent / Sibling / Spouse of
an Associate Member

Name

Membership #

OR they are a : Child / Parent / Sibling / Spouse /
Niece / Nephew / Grandchild /
Widow or Widower of an Ordinary
Member

Name

Membership #

Eligibility and/or Relationship is established by: Discharge Certificate / Service Records / Marriage Certificate / Birth Certificate / Adoption Certificate
or Other : _____

For an ORDINARY MEMBERSHIP

(Circle your selection & attach a photocopy of the supporting documents)

Date of enlistment :

Service Number :

Unit Name (If known):

Rank Attained :

Type of Service :

Canadian Regular Forces / Canadian Reserve Forces / Her Majesty's Regular Forces / Her Majesty's Reserve Forces

(Circle one)

US Forces / UN Forces / RCMP / Police / Coast Guard / Other: _____

Dates of Service:

Medals and Decorations :

Eligibility is established by: Discharge Certificate / Service Records / ID Card / Certificate of Service
or Other : _____

Office Use:

Paid for Year(s) :

Current Yr

Prepaid 1

Prepaid 2

Prepaid 3

Prepaid 4

Prepaid 5

Total Amount Paid : \$

Payment Method

Cheque Number

Payment Data : Cash / Debit / Visa / MC / Cheque

Seconded at Executive Meeting Dated :

Initated Date :

☐

In Office

☐

At General Mtg

Membership Chairman Signature: