



THE ROYAL CANADIAN LEGION
APPLICATION FOR MEMBERSHIP

ORDINARY ASSOCIATE AFFILIATE NON-VOTING
(All applicants must complete Pages 1 & 2 - Type or Print in BLOCK letters)

Command Branch Name Branch No.
Branch Address

Applicant's Name: Mr Mrs Ms
surname given names

Address: street / po box / RR# / site # city prov postal code

Phone No: (Home) (Bus) E-Mail

Date of Birth: Place of Birth: Citizenship: M F

Next of Kin: Relationship:

Have you ever been a member of the Legion? No Yes If yes, complete Record of Legion Service on Page 2.

What BRANCH ACTIVITIES interest you most?

Service Work - Welfare Remembrance - Poppy Branch Social Activities Organization - Admin
Sports Program Youth Activities Committee Work Other

ORDINARY MEMBERSHIP - Please complete Sections D & E AND Page 2
ASSOCIATE MEMBERSHIP - Please complete Sections A or B or C AND Page 2
AFFILIATE NON-VOTING MEMBERSHIP - Please complete Page 2

Section (Must also complete Sections "D" and "E")

A I have served in the:

Cadets Cadet Civilian Instructors Navy League of Canada Polish Forces Fire Services

Section (Must also complete Sections "D" and "E")

B I am the: Parent Spouse Widow/er Grandchild Child Sibling Niece/Nephew of
a person who is/was eligible for Ordinary Membership; and who is/was: a Canadian citizen or Common-
wealth subject or a USA citizen (USA Branch/Post only) or a NATO country citizen (Germany & Netherlands only)

Section (Must also complete Section "D")

C I am the: Child of an Associate Member; or I am the: Spouse Parent Sibling
of an Associate Member who qualified under Section "A" or Section "B": who is an
Associate Member of Branch: Command and Branch No.
Name and Membership Number is: Name: #

Section Eligibility and/or Relationship is established by:

D Discharge Certificate Service Records Marriage Certificate Birth Certificate Adoption Certificate
Other

Section Service Information for:

E Ordinary Membership Associate Membership
Person who served: Self or: Relationship:
who is/was an Ordinary Member of Branch: Command and Branch No. Membership #:
Date of enlistment: Service No: Rank: Service Unit:
Type of Service: Wartime Can. Reg. Force Her Majesty's Reg. Force Reserve
Reserve "C Class" RCMP R.N.F. Constabulary Wartime Allied Force Underground Force
NATO NORAD US Force Vietnam Police Force
Coast Guard Other:
Still Serving Discharged Date: Type of Discharge:

Theatres of Service: Medals and Decoration:

Membership dues include a minimum subscription rate of \$6.00 plus GST to Legion Magazine

All applicants MUST complete information on Page 2

Privacy Statement for The Royal Canadian Legion

Dominion Command, 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.

Applicant's Signature: _____ **Date:** _____

- ◆ 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 communist, 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 Canadian Legion.
- ◆ I hereby certify that I am not eligible for Ordinary &/or Associate membership (applies to Affiliate Non-Voting members only).
- ◆ I hereby agree to participate in The Royal Canadian Legion's initiation ceremony, which shall include a declaration of loyalty to the Sovereign and Canada and obedience to the General By-Laws.
- ◆ If Magazine is NOT required please tick box:

Applicant's Signature: _____ **Date:** _____

Proposer's Name: _____ Signature: _____

Seconder's Name: Print _____ Signature: _____
Print

Record of Legion Service

Date of Original Admission to Legion: _____ Date of Initiation: _____

Branch Joined					
Command & Branch #	Location		Date Joined	Date Left	
Office Held			Honours and Awards Held		
Command & Branch #	Office	Date	Command & Branch #	Award	Date

Have you been expelled from any Legion Branch or any other veteran's organization? No Yes
If yes, give Branch/Organization and particulars.

Command & Branch # _____ Particulars: _____

For Branch Use

Certified that section 222 of the General By-Laws has been applied and that satisfactory proof of service and relationship has been submitted where applicable.

Branch Membership Committee: _____ Date: _____

Date Passed at General Meeting: _____ Date of Initiation: _____

Membership dues paid: \$ _____ Date: _____

Provincial Command Approval: (where required) _____ Date: _____

Member Registration Form and Per Capita Tax Submitted to Dominion Command Date: _____