

Have you ever been a member of the Legion? No ☐ Yes ☐ If yes, Membership # \_\_\_\_\_

## Membership Type

- ☐ **Ordinary** – Indicate Type of Service and Service # \_\_\_\_\_

Type of Service: ☐ Reserve "C Class" ☐ Wartime ☐ Can. Reg. Force ☐ Her Majesty's Reg. Force ☐ Reserve  
☐ NATO ☐ RCMP ☐ R.N.F. Constabulary ☐ Wartime Allied Force ☐ Underground Force  
☐ Coast Guard ☐ NORAD ☐ US Force ☐ Vietnam ☐ Police Force  
☐ Cadet Instructor Cadre (CIC) ☐ Non-military

☐ **Associate**

Relationship: ☐ I am the spouse, widow/er, parent, child, grandchild, sibling, niece/nephew of a person who is/was eligible for Ordinary membership. Indicate relationship: \_\_\_\_\_  
☐ I am the child, spouse, sibling of an Associate member of Command/Branch #: \_\_\_\_\_ and whose Name and Membership # is: \_\_\_\_\_

**OR** Type of Service ☐ Cadets or Cadet Civilian Instructor ☐ Navy League of Canada Service #: \_\_\_\_\_  
☐ Federal or Provincial Emergency Response Service ☐ Polish Armed Forces

☐ **Affiliate Voting:** I am a Canadian citizen or Commonwealth subject from an Allied nation and support the aims and objects of The Royal Canadian Legion.

☐ **Affiliate Non-Voting:** I am a non-Canadian citizen or a non-Commonwealth subject from an Allied nation and support the aims and objects of The Royal Canadian Legion.

☐ I would like the French insert. ☐ I do not wish to receive my copies of LEGION Magazine.

## Membership Declaration and Initiation

Initial here to confirm you agree with the above declaration and requirements.

**legion.ca**

## TO BE COMPLETED BY THE LEGION BRANCH

Command: \_\_\_\_\_ Branch Name: \_\_\_\_\_ Branch #: \_\_\_\_\_

Branch Address: \_\_\_\_\_

### Service Information

Person who served: ☐ Self or (Name): \_\_\_\_\_ Relationship: \_\_\_\_\_ who is/was

an Ordinary Member of Command/Branch: \_\_\_\_\_ Membership #: \_\_\_\_\_

Service # \_\_\_\_\_

### Documentation

☐ Service Record ☐ Discharge Certificate ☐ Marriage Certificate ☐ Birth Certificate ☐ Adoption Certificate

☐ Other: \_\_\_\_\_

Discharge Date: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

Theatres of Service: \_\_\_\_\_ Medals/Decorations: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Next of Kin

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Tel: \_\_\_\_\_

### Administration

Certified that section 221 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: \_\_\_\_\_

☐ Membership Registration Form and Per Capita Tax Submitted to Dominion Command Date: \_\_\_\_\_

### Record of Legion Service

Date of Original Admission to Legion: \_\_\_\_\_ Membership #: \_\_\_\_\_ 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		