The Royal Canadian Legion

Application For Membership



Applicant Name:	\bigcirc Mr \bigcirc Mrs \bigcirc Ms			
		Surname	Given names	
Address:				
	Street / PO Box / RR # / Site #	City	Prov	Postal Code
Home Tel:		_Other Tel:	E-mail:	
Date of Birth:		Citizenship:		MO FO
	dd/mm/yyyy			
Have you ever be	en a member of the Legion	n? No⊖ Yes⊖ If yes, M	embership #	

Membership Type

O Ordinary – Indicate Type of Service				
Type of Service:	 Reserve "C Class" O Wartime NATO RCMP Coast Guard NORAD Cadet Instructor Cadre (CIC) 	 Can. Reg. Force R.N.F. Constabulary US Force Non-military 	 ○ His Majesty's Reg. Force ○ Wartime Allied Force ○ Vietnam 	○ Reserve○ Underground Force○ Police Force
O 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:			
OR Type of Service O Cadets or Cadet Civilian InstructorO Navy League of CanadaO Federal or Provincial Emergency Response ServiceO 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.

LEGION Magazine Subscription

Membership dues include a one-year subscription rate of \$12.49 plus applicable taxes.

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

Membership Declaration and Initiation

The Royal Canadian Legion's mission is to serve veterans, which includes serving military and RCMP members and their families, to promote remembrance and to serve our communities and our country.

I support the mission statement of the Royal Canadian Legion

I have read and agree to support the purposes and objects of the Royal Canadian Legion (located in the General By-Laws)

- I hereby solemnly declare that I am not a member, nor affiliated with, any group, party or sect whose interests conflict with the avowed purposes of the Legion, and I 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 that I have never been expelled, or had my membership revoked, from any Legion Branch or any other Veterans organization I hereby certify that I have never been convicted of any serious criminal offence involving either violence or sexual misconduct of any type I hereby certify that I have never been dishonourably discharged from, deserted from nor evaded service in the Forces of any country I agree to participate in the annual Poppy Campaign

I agree to abide by the constitution, rules and by-laws of the Royal Canadian Legion.

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

Personal Information Consent

I understand that the personal information collected on this form will be used by The Royal Canadian Legion ("Legion") for the purposes of processing my membership application and communicating with me about my membership, and may be used internally by the Legion at the national, provincial and branch levels for administration purposes and for the other purposes provided in its Privacy Statement at legion.ca/legal. By completing, signing and submitting this form, I am giving my consent for the Legion to collect, use or disclose my personal information for these purposes. I understand that I may withdraw my consent at any time by contacting Legion Member Services at 855-330-3344.

Applicant Signature:_

Date:

Congratulations you are now an initiated member of the Royal Canadian Legion subject to Branch policy. Further welcoming ceremony processes are at the discretion of your local Branch.

TO BE COMPLETED BY THE LEGION BRANCH

_ Branch Name:	Branch #:	
	elationship: who is/was	
	Membership #:	
○ Marriage Certificate ○ Birth Certificate	O Adoption Certificate	
Type of Discharge:		
Medals/Decorations:		
Relationship:	Tel:	
Laws has been applied and that satisfactory	proof of service and relationship has been	
	Date:	
	_ Date of Initiation:	
	Date:	
Capita Tax Submitted to Dominion Command	Date:	
	Re	

Record of Legion Service

Date of Original Admission to Legion:	_ Membership #:	Date of Initiation:
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Branch Joined					
Command & Branch #	Branch # Location		Date Joined	Date Left	
Office Held			Honours and Awards Held		
Command & Branch #	Office	Date	Command & Branch #	Award	Date