



**Applicant Name:**  Mr  Mrs  Ms \_\_\_\_\_  
Surname Given names

**Address:** \_\_\_\_\_  
Street / PO Box / RR # / Site # City Prov Postal Code

**Home Tel:** \_\_\_\_\_ **Other Tel:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Citizenship:** \_\_\_\_\_ **M**  **F**   
dd/mm/yyyy

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.

### LEGION Magazine Subscription

Membership dues include a one-year subscription rate of \$9.49 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 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

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