

NOMINATION FORM

RECRUITER OF THE YEAR

Post adjutants must send this form to department headquarters.

Department adjutants must send this form to
The American Legion, Attn: Membership Division,
P.O. Box 1055, Indianapolis, IN 46206.

Type or print:

In the Department of _____, the top new member recruiter of membership enrolled for current membership year as of May target date, and transmitted to National Headquarters, is:

1. Name _____ Post _____ Member ID _____

Address _____

City / State / ZIP _____

Phone (_____) _____

Number of new members enrolled (minimum 10) _____

Attach list of names and ID numbers of new members.

The next highest new member recruiter (make additional copies if needed):

2. Name _____ Post _____ Member ID _____

Address _____

City / State / ZIP _____

Phone (_____) _____

Number of new members enrolled (minimum 10) _____

Attach list of names and ID numbers of new members.

Post adjutant

Department adjutant

Date

Date

This form must reach department headquarters on or before the May target date and National Headquarters by the last day of May.