

Marine Corps League

Application for Membership



Full Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

E-Mail _____ Phone _____ FAX _____

Date of Birth: ____/____/____ Date of Enlistment/Commissioning ____/____/____

Date of Discharge/Separation/Retirement ____/____/____ SSN: _____ - _____ - _____

Type of Application: () New or () Renewal. Type of Membership: () Associate () Regular () Dual

Have you ever been convicted of a felony? () Yes () No. If "yes" is checked, I agree to waive my rights under the Privacy Act and disclose the nature of the felony conviction for consideration of membership in the Marine Corps League.

() I hereby apply for membership in the Marine Corps League, **Intracoastal Detachment #1058**, and enclose \$40.00 for a One (1) year membership*.

() I hereby apply for membership in the Marine Corps League as a member at large (MAL) and enclose \$30.00 for a one (1) year membership*.

(*Includes free a subscription to "Semper Fi - The Magazine of the Marine Corps League".)

I hereby certify that I am currently serving or have served honorably in the U.S. Marine Corps , on active duty, for not less than ninety (90) days* or have served or am currently serving in the U.S. Marine Corps Reserve and have earned no less than ninety (90) Reserve Retirement Credit Points or that I have served or am currently serving as a U.S. Navy Corpsman who has trained with Marine FMF units in excess of ninety (90) days and earned the Marine Corps Device or Warfare Device worn on the Service Ribbon authorized for FMF Corpsman. If discharged, I am in receipt of an honorable service discharge upon request . General Discharge under Honorable Conditions is acceptable. Further I hereby authorize Marine Corps League National Headquarters to request a copy of my DD-214 from the National Personnel Records Center if deemed necessary.

(*Korean War Era Marines See National Bylaws Article 6, Section 600).

Sponsor: (where applicable)

Applicants Signature)

Please print and complete this form. Upon Completion, please send this form with check or money order in the amount of \$40.00, for a one (1) year Regular Membership, to the:

Intracoastal Detachment #1058 Marine Corps League , PO Box 11248, Fort Lauderdale, FL 33339.

You may also give it to your sponsor, if known.

Applicants for MAL Membership, please fill out and remit this form with required payment of \$30.00 to:
Marine Corps League: P.O. Box 3070, Merrifield, VA 22116.

NOTE: If you are applying for "Regular Membership", please also include a photo copy of your last DD 214, Certificate of Discharge, Active Duty or current Reserve ID Card.