



**"FULL SPEED AHEAD"
LIGHT THE WAY TO 100% MEMBERSHIP WITH
COMMANDER JAMES W. CASEY**

**Print or type information below and mail to:
Membership Department
The American Legion Department of New York
112 State St. Suite 1300
Albany, NY 12207**

Recruiters Name : _____

Address: _____

State: _____ **Zip:** _____

Membership ID # _____ **Post:** _____

NAME of new member	Address	State	Zip
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

A new member is a Veteran who was not a Legionnaire in the 2006 membership year.