

**American Legion Auxiliary**

**Member Profile**

**8766 Rim RD**

**Nampa, ID 83686**

**(208) 342-7066**

**idalegionaux@gmail.com**

**Units:** Please use this form to submit member changes to the Department. You may enter changes for more than one member on this form by indicating each Member’s Name and Member ID in the spaces provided.

Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_ (number) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 In the “Ch #” column, please indicate the change # type from the list below.

1. Name 7. Class Change
2. Contact info (address, phone, and e mail) 8. War eligibility
3. Deceased (include date of death) 9. Branch of Service
4. Continuous Years 10. Make Honorary Life
5. Marital Status 11. Other
6. Communication preference

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| --- | --- | --- | --- | --- |
| **Effective Date**  | **Change #**  | **Member Name**  | **Members ID #**  | **New Information/Notes**  |
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