



# American Legion Riders

## Post 363

### Flags & Pole Application

#### Veteran's Information

Full Name: \_\_\_\_\_ Age: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address (Must be where flagpole will be installed)*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Service Branch: \_\_\_\_\_ Rank at separation: \_\_\_\_\_ Total Time Served: \_\_\_\_\_  
*(i.e.: E4 or O5) Yrs/Mo*

Service Dates: \_\_\_\_\_  
*Please list all if not consecutive*

Are you a member of the American Legion? YES ☐ NO ☐ Do you own or rent your home? Own ☐ Rent ☐

Post # \_\_\_\_\_  
Membership # \_\_\_\_\_

A member of Sons of the American Legion? Post # \_\_\_\_\_ YES ☐ NO ☐ Landlord Name and Address: \_\_\_\_\_  
Membership # \_\_\_\_\_

A member of the American Legion Riders? Post # \_\_\_\_\_ YES ☐ NO ☐

If married, is spouse a member of the American Legion Auxiliary? YES ☐ NO ☐ Phone #: \_\_\_\_\_

A member of AmVets? YES ☐ NO ☐ A member of the VFW? YES ☐ NO ☐

A Combat Veteran? YES ☐ NO ☐ A Purple Heart or Congressional Medal of Honor recipient? PH ☐ CMH ☐

#### Nominators Information

Full Name: \_\_\_\_\_  
*First M.I. Last*

PH. # (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Veteran: \_\_\_\_\_ Is the veteran aware of his/her nomination? YES ☐ NO ☐