

**CERTIFICATION FORM  
SONS OF THE AMERICAN LEGION  
BLUE BRIGADE NEW MEMBER RECRUITER AWARD  
2008**

**SQUADRON: RETAIN COPY FOR YOUR RECORDS**

**SEND TO: NATIONAL HEADQUARTERS ON OR BEFORE MAY 14, 2008.**

The following member in the Detachment of \_\_\_\_\_ qualifies for the S.A.L. "Blue Brigade" Award for enrolling 30 or more **NEW MEMBERS** into the Sons of The American Legion by the **May Target Date (May 14, 2008)** . **Reinstated members do not qualify as new members.**

First time qualifiers for the S.A.L. "Blue Brigade" receive:

An S.A.L. "Blue Brigade" Jacket and S.A.L. Blue Brigade Certificate

Second consecutive time (or more) qualifiers for the award receive:

An S.A.L. "Blue Brigade" Certificate and a "hash mark" for jacket sleeve.

**PLEASE CHECK THE APPROPRIATE BOX (ES):**

This S.A.L. "Blue Brigade" award will be my:

A. First S.A.L. "Blue Brigade" Award

B. Other (Specify 2<sup>nd</sup> time or more qualified) \_\_\_\_\_

*(PLEASE TYPE OR PRINT...circle size)*

NAME \_\_\_\_\_ SQUADRON NO. \_\_\_\_\_

Size: (S.M.L.XL.XXL.XXXL)

MEMBER ID NUMBER \_\_\_\_\_

Circle One:    **SAL**                    **LEGION**                    **AUXILIARY**

ADDRESS \_\_\_\_\_

Address **[NO P.O. Boxes]**                    City                    State                    ZIP

PHONE: (\_\_\_\_) \_\_\_\_\_ Number of **NEW MEMBERS** enrolled (minimum 30) \_\_\_\_\_

\_\_\_\_\_  
Department Adjutant (signature)

\_\_\_\_\_  
Squadron Adjutant (signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

**USE ADDITIONAL SHEETS IF NECESSARY**

\_\_\_\_\_  
Date

**DEPARTMENT REMINDER-** forward a copy of this form **certified** and a list of the new members signed up to: S.A.L. National Liaison, The American Legion, PO Box 1055, Indianapolis, IN 46206. All forms are due by the May membership target date.

**SONS OF THE AMERICAN LEGION  
CERTIFICATION FORM  
NEW MEMBER LISTING**

<b>#</b>	<b>Name</b>	<b>Detachment</b>	<b>Squadron Number</b>
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