

AMERICAN LEGION AUXILIARY DEPARTMENT OF TEXAS
 Po Box 140407, Austin, Tx 78714 Ph. 512-476-7278 Fax 512-482-8391
membership@alateexas.org www.alateexas.org
MEMBERSHIP TRANMITTAL FORM

Unit Number _____ Location _____ Membership Year _____

Person completing form _____ Check# _____

Address _____ City _____ Zip _____

Phone# _____ E-mail _____

Please fill out for each member you are transmitting current membership:

Total Seniors (new & renewals) _____ @ \$24.00 \$ _____

Total Juniors (new & renewals) _____ @ \$4.75 \$ _____

Credits Used (PUFL or Membership) _____ (subtract) \$ _____

Total Sr. & Jr. names listed (sent) _____ Check Total \$ _____

ID NUMBER	LAST NAME	FIRST NAME	JR	SR
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