

Marine Corps League Membership Application

Please Print Legibly

I hereby apply for membership in the Marine Corps League

_____ Detachment.
(If known, enter the name or number of the detachment you wish to join.)

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Married: Y N (Circle One)

Next of Kin: _____

Date of birth: ____/____/____ (mo/day/yr)

Date of enlistment/commissioning: ____/____/____ (mo/day/yr)

Date of separation: ____/____/____ (mo/day/yr)

Service Number/SSN: _____

Sponsor: _____

Type of Application: () Renewal () Regular () Associate () Life Member

I hereby certify that I am currently serving or have served honorably in the U.S. Marine Corps , on active duty, for not less than ninety (90) days * or have served or am currently serving in the U.S. Marine Corps Reserve and have earned no less than ninety (90) Reserve Retirement Credit Points or that I have served or am currently serving as a U. S. Navy Corpsman who has trained with Marine FMF Units in excess of ninety (90) days and earned the Marine Corps Device or Warfare Device worn on the Service Ribbon authorized for FMF Corpsmen. If discharged, I am in receipt of an honorable discharge or DD 214. By signing below, I hereby agree to provide proof of honorable service/discharge upon request. (*Korean War Era Marines See National Bylaws, Article 6, Section 600)

Signature: _____

Date: ____/____/____ (mo/day/yr)

Mail this application with a check for \$41.00 (\$36.00 for Renewals) payable to: MCL Det 597

Address: MCL Ventura County Det 597
2828 Cochran Street #420
Simi Valley, CA 93065