

NEW MEMBER RECRUITER AWARD

Date _____

Mail to: Department Headquarters

Fax: 407/299-0901

PO Box 547859

Email: igraham@floridalegion.org

Orlando, FL 32854-7859

KEEP A COPY FOR YOUR RECORDS.

Please check one: **Department Fall Conference** **Deadline: Oct. 04, 2017**
 Department Convention **Deadline: June 06, 2018**

This is to certify that the following member has signed up a minimum TWENTY-FIVE (25) new members by the June goal date. **New members recruited can only be used once. They cannot be part of any Department previous list. Transfers do not count s new members.**

Attach a list of new members (use form on next page to list members)

LEGIONNAIRE _____ POST # _____ MEMBER ID# _____

ADDRESS _____

CITY _____ ST _____ ZIP+4 _____

NUMBER OF NEW MEMBERS ENROLLED _____ PHONE # _____

Adjutants' Name _____ Adjutants' ID # _____

PHONE # _____

Do not write below line

For Department's use only

Date Received _____

**MAIL TO BE RECEIVED ON OR BEFORE THE OCT OR THE MAY
GOAL DATE.**

DUPLICATE AS NECESSARY

NEW MEMBER LIST

1. _____	14. _____
2. _____	15. _____
3. _____	16. _____
4. _____	17. _____
5. _____	18. _____
6. _____	19. _____
7. _____	20. _____
8. _____	21. _____
9. _____	22. _____
10. _____	23. _____
11. _____	24. _____
12. _____	25. _____
13. _____	

Duplicate as needed