CERTIFICATION FORM
"DEPARTMENT SILVER BRIGADE"
NEW MEMBER RECRUITER AWARD

POST: RETAIN COPY FOR YOUR RECORDS
SEND TO: DEPARTMENT BY MAY 1st

The following member in the Department of Michigan qualifies for the "Department Silver Brigade" Award for enrolling 20 **NEW MEMBERS*** into The American Legion by May 1st. (**Please attach the list of names with each nomination form**).

Qualifiers for the "Silver Brigade" receive:
Plaque and 20 Star pin

NAME _____ POST NO. _____ ID# _____

ADDRESS_____
City State Zip
PHONE: (___) _____ Number of **NEW MEMBERS** enrolled (at least 20) _____

_____ _____
Department Adjutant (signature) POST ADJUTANT (signature)

_____ _____
Date ADDRESS

_____
DATE (Cannot be after May 1st)

USE ADDITIONAL SHEETS IF NECESSARY

***A "**NEW**" member is defined as ANY eligible veteran who was not a paid member, in good standing, for the 2017 membership year. Transfers do not count as new member.