



**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 2016 membership year or first-time member for 2017. Transfers do not count as new member.