



**Sons Of The American Legion
New Member "BLUE BRIGADE" Recruiter Award
2021 Certification Form**

DETACHMENT ADJUTANT: Retain copy for your records

SUBMIT THIS FORM TO NATIONAL HEADQUARTERS (Prior to July 31st)

By Mail:	By Email:	By Fax:
BLUE BRIGADE AWARD	sal@legion.org	(317) 630-1413
C/O National SAL		
P.O. Box 1055	Phone #:	
Indianapolis, IN 46206	(317) 630-1205	

The following S.A.L. member in the Detachment of _____ has enrolled 30 or more **NEW MEMBERS** into the Sons of The American Legion by **July 31st. (Reactivated members do not count)**

Cutoff: 30 days prior to the S.A.L. National Convention

This S.A.L. "Blue Brigade" award will be my:

- A. First S.A.L. "Blue Brigade" Award
- B. Other (i.e. Consecutive years in a row) _____

*Consecutive year awardee receives a SAL "Blue Brigade" Certificate and Chevron

(PLEASE ENSURE PRINTED FORMS ARE LEGIBLE...)

(Please Select Jacket Size)

Size: ("""" S M L XL 2XL 3XL 4XL 5XL)

NAME _____ SQUADRON NO. _____

ADDRESS _____ EMAIL _____

City State Zip Member ID#

PHONE: (____) _____ Number of **NEW MEMBERS** enrolled (minimum 30) _____

Deliver to Recruiter [] Deliver to Squadron []

USE ATTACHED NEW MEMBER LISTING FORM

*Please make sure that all new members listed have been processed and have been assigned a unique 9-digit ID# before submission. The award form cannot be processed or verified until all new members are listed in the national membership database.

**SONS OF THE AMERICAN LEGION
CERTIFICATION FORM
NEW MEMBER LISTING**

#	9-Digit Member ID#	First & Last Name	Detachment	Squadron Number
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Department Adjutant (signature)

Detachment Adjutant (signature)

Date

Date

USE ADDITIONAL SHEETS IF NECESSARY