# Sons Of The American Legion
# New Member "BLUE BRIGADE" Recruiter Award
# 2020 Certification Form

**DETACHMENT ADJUTANT: Retain copy for your records**

**SUBMIT THIS FORM TO NATIONAL HEADQUARTERS (Prior to July 29, 2020)**

| By Mail: | By Email: | By Fax: |
|---|---|---|
| BLUE BRIGADE AWARD<br>C/O National S.A.L. Liaison<br>P.O. Box 1055<br>Indianapolis, IN 46206 | sal@legion.org | (317) 630-1413 |

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 the **July Target Date (July 29, 2020). (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 (Specify 2nd time or more qualified) _____

*(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) _____

**USE ATTACHED NEW MEMBER LISTING FORM**

Consecutive year awardee receives a S.A.L. "Blue Brigade" Certificate and Chevron

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

| # | 9-Digit Member ID# | Name | Detachment | Squadron Number |
|---|---|---|---|---|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| 11 | | | | |
| 12 | | | | |
| 13 | | | | |
| 14 | | | | |
| 15 | | | | |
| 16 | | | | |
| 17 | | | | |
| 18 | | | | |
| 19 | | | | |
| 20 | | | | |
| 21 | | | | |
| 22 | | | | |
| 23 | | | | |
| 24 | | | | |
| 25 | | | | |
| 26 | | | | |
| 27 | | | | |
| 28 | | | | |
| 29 | | | | |
| 30 | | | | |

_____ _____

Department Adjutant (signature) Detachment Adjutant (signature)

_____ _____

Date Date

**USE ADDITIONAL SHEETS IF NECESSARY**