



ANNUAL POST DATA REPORT

REPORT MEMBERSHIP YEAR 2025

GA-AMERICAN LEGION POST _____ (_____) DISTRICT _____ DATA AS OF _____

Post's Legal Name (As shown of the Post Charter): _____ Post's location (As shown on the Post Charter): _____

(Contact your Department Headquarters if an of the information above is correct)

Please type or print in ink and forward to the Department.

CURRENTLY ON FILE:

CHANGE OR CORRECTION:

1) Post's Home (Physical) Address

Note: Enter only if Post owns or leases this facility

2) Post's Mailing Address:

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3) Post's Dues Mailing Address:

Note: If the address contains a member's name or is being Sent to a member's home address as the contact, please provide the Member's ID#.

4) Current Annual Post Dues: \$ _____

YEAR _____ Dues will be \$.

Note: All dues rates will be effective July 1st

Effective Date / /

Unless an alternate Effective date is entered.

5) Post's Telephone Number

6) Post's Fax Number

Note: DO NOT use personal phone numbers of members

7) Post's Email Address:

8) Post's Internet Website:

9) Post's Meeting Date & Time:

10) Post sponsors an ALR Chapter

11) Smoking permitted No Smoking

12) Facilities available to rent for special events

13) Post has a club room (food & drink)

Post Adjutant or Commander Signature

Date

IMPORTANT

Complete and return this form to your Department Headquarters no Later than April 15. Failure to meet this deadline may cause the first renewal notices to be mailed with incorrect information!