

Michigan American Legion Wilwin Lodge

APPLICATION FOR FREE ADMISSION

Name of Veteran _____ Age _____ Male? _____ or Female? _____

Address _____

City _____ State _____ Zip Code _____

Telephone (_____) _____ Email Address _____

Are you a Michigan Resident? Yes ___ or No ___

MILITARY SERVICE: Indicate which branch of service and the dates you served.

Branch of Military Service _____ Dates _____

Are you currently on active duty? Yes ___ or No ___

Are you applying through a VA facility? Yes ___ or No ___ If "yes" indicate which facility: _____

Are you disabled? Yes ___ or No ___ If "yes" what is your disability? _____

Do you need a caregiver? _____ Do you need a barrier free accommodation? _____

Do you have any physical restrictions? _____ If so, what are they? _____

Are you a member of The American Legion Family? Yes ___ or No ___

(Membership is not required for acceptance.)

FAMILY INFORMATION: Please list the names and ages of those accompanying you. (Children must be of minor age and a current legal dependent of the veteran.)

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

PERSONAL/EMERGENCY INFORMATION

Physician's Name _____ Address _____ Phone Number _____

Person(s) to contact in case of emergency _____ Address _____ Phone Number _____

STATEMENT OF APPLICANT: I certify that if I or my family incurs any expenses for medications, hospitalization, or any other reason while at the Wilwin Lodge facility, we will be responsible for such expenses. I will hold harmless The American Legion, Department of Michigan, and Michigan American Legion Wilwin Lodge, Inc. for any injuries or liability while a guest of the Wilwin Lodge.

Signature of Applicant _____ Printed Name _____ Date _____

Witness Signature _____ Witness Printed Name _____

I assume responsibility for the loss of, or damage to, my personal effects while at the Wilwin Lodge facility. I will furnish my own transportation to and from the Wilwin Lodge.

Signature of Applicant _____ Date _____