

FLAG REWARDS



Registration

(Only one registration per Post. All fields are required.)

Post # _____ Street Address _____

City _____ State _____ Zip _____ Phone _____

Preferred Email Address* _____

Please read password requirements below!

Create a Password* _____

Password Requirements

- At least 8 characters (no spaces)
- No more than 10 characters
- Uppercase and lowercase letters
- At least 1 number
- None of the following special characters: () < > “ ‘

IMPORTANT!

Your email address & password will be used to verify your identity for the following:

- Spending points (by phone, mail, fax, or web site).
- Inquiries for your Points balance or Points transactions.
- Ordering Flags for your Post via web site.

In addition, an annual statement of Flag purchases will be sent to your email address by March 1 each year.

Post Adjutant (signature) _____

Post Adjutant (printed) _____

Mail or fax this form to: American Legion Emblem Sales, P.O. Box 36460, Indianapolis, IN 46236-0460

Fax: 317-630-1381

(Keep a copy for your records!)