American Legion Auxiliary Department of South Dakota Member Data Update Form

Please mail to: South Dakota American Legion Auxiliary, PO Box 983, Mitchell, SD 57301

Town & Unit #:	District #:	
N.	ID#:	
Date of Request:		
Type of Change: Address Change	Name Change	Additional Information
Address Change:	Former:	
	New:	
Name Change:	Former:	
	New:	
Additional Information (i.e. co	ntinuous years, date of birth, phon	e number, email:
Submitted By:		Date:
D 1 CO		TT 1 - 10/10/0004

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