



# *Certificate of Membership*

*This is to certify that*

*Junior Member of the \_\_\_\_\_*

*Unit No. \_\_\_\_\_ Department of Wisconsin having attained the age of eighteen is hereby admitted into full active membership as a Senior Member of the American Legion Auxiliary with all privileges.*

*For your faithfulness in the program of Junior Activities, for your cooperation, loyalty and devotion to the purposes of the American Legion Auxiliary, may this certificate of appreciate recognize your importance in our community of volunteers serving veterans, military, and their families. Your dedication to advancing the mission of the American Legion Auxiliary in the spirit of goodwill is a tribute to the veteran whose service your membership forever honors.*

*Becky Mueller*  
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Becky Mueller, Department President

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Unit Official

\_\_\_\_\_  
Date