



The American Legion – Department of Wisconsin  
 SONS OF THE AMERICAN LEGION – DETACHMENT OF WISCONSIN  
 PO Box 388  
 Portage, WI 53901-0388

Squadrons are required to submit this form annually  
 Contact Detachment Adjutant David Faust at  
 608-334-6747 adjutant@wisal.org  
 www.wisal.org

SQUADRON INFORMATION: Squadron # \_\_\_\_\_ District # \_\_\_\_\_ County \_\_\_\_\_

Squadron Name \_\_\_\_\_ (same as your sponsor Post)

Membership Dues \$ \_\_\_\_\_ Meeting Date/Day \_\_\_\_\_ Meeting Time \_\_\_\_\_

Squadron Meeting Location/Address \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_

Squadron Email Address \_\_\_\_\_

Phone: \_\_\_\_\_

PRIMARY SQUADRON CONTACT: Membership ID # \_\_\_\_\_ Title \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

*(All Detachment mailings will be sent to your Squadron Primary Contact Person)*

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Squadron Officers and Committee Chairmen

Commander \_\_\_\_\_

Address \_\_\_\_\_

City & ZIP \_\_\_\_\_ Phone \_\_\_\_\_

# ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

E-mail \_\_\_\_\_

Adjutant \_\_\_\_\_

Address \_\_\_\_\_

City & ZIP \_\_\_\_\_

Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

E-mail \_\_\_\_\_

Squadron Advisor \_\_\_\_\_

Address \_\_\_\_\_

City & ZIP \_\_\_\_\_

Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

E-mail \_\_\_\_\_

First Vice \_\_\_\_\_

E-mail \_\_\_\_\_

Second Vice \_\_\_\_\_

E-mail \_\_\_\_\_

Chaplain \_\_\_\_\_

E-mail \_\_\_\_\_

Americanism \_\_\_\_\_

E-mail \_\_\_\_\_

Finance Officer \_\_\_\_\_

E-mail \_\_\_\_\_

Children & Youth \_\_\_\_\_

E-mail \_\_\_\_\_

Sergeant At Arms \_\_\_\_\_

E-mail \_\_\_\_\_

Membership \_\_\_\_\_

E-mail \_\_\_\_\_

Sergeant At Arms \_\_\_\_\_

E-mail \_\_\_\_\_

Veterans Affairs \_\_\_\_\_

E-mail \_\_\_\_\_

Return this form to: SONS OF THE AMERICAN LEGION, PO BOX 388, PORTAGE, WI 53901