

ALA-MIS Setup Request Form
American Legion Auxiliary
Department Of Alabama

Type Of Request:

- Add New User
 Replace Current User
 Change Current User Level
 Deactivate Current User ONLY (Not replacing)

Unit Member Name (Requesting Access):

First: _____ Last: _____

Unit Member Name Being Replaced or Removed:

First: _____ Last: _____

Unit Member ID Number:

Unit Member Email Address:

Unit Number: _____

District Number: _____

(IMPORTANT!!! There can only be TWO USERS PER UNIT. If not specified, it will be held in the office until corrected.) It is recommended that the Unit President and the Unit Membership Chairman have access.

Access Level Requesting (Choose Only One):

- Unit View \$10.00 (View Only – Make No Changes)
 Unit Write \$15.00 (Update Records & Enter New Member Applications)
 Unit Full Access \$20.00 (Pay Dues & Make Changes. MUST ATTEND TRAINING)
 District View \$10.00 (AKA Department Read Only)