2021 GO-GETTER CERTIFICATION FORM

This form must be completed and mailed to Department Headquarters, PO Box 5057, West Fargo, ND 58078 or fax it to 701-293-9951 by April 15, 2021. Forms received *after* the due date will not be accepted.

Please note the go-getter qualifications have been revised for the 2021 membership year.

A recruiter must be a Legionnaire and have a minimum of <u>15</u> qualifying points to be a Go-Getter.

EXPLANATION OF POINTS AND POST ELIGIBILITY REQUIREMENTS

1 Point per Renewal: 1 point for each Legion membership renewal with a maximum of 10 points for Posts below 100% of goal. Unlimited renewal points are allowed for Posts which met 100% of their goal.

5 Points per New Membership: <u>5</u> points for each new membership recruited for the American Legion. A reinstated membership is considered a new member.

All renewals and new members corresponding with this report must be enrolled at the Department by April 15, 2021.

A Go-Getter must be a Legionnaire of a Post in the Department of ND. The recruited and the recruited member must both be a member of a Post in the Department of North Dakota.

SILVER Go-Getters status granted to a Go-Getter who earns at least 25 points. **GOLD Go-Getter** status granted to a Go-Getter who earns at least 30 points.

Post Location	Post # District #
2021 Membership Goal 2021 Paid M	Iembers Percent of Goal%
Name of Go-Getter	Name of Go-Getter
☐ First Time Go-Getter - First Time Go-Getters receive a cap patch.	☐ First Time Go-Getter - First Time Go-Getters receive a cap patch.
Membership ID# of Go-Getter	Membership ID# of Go-Getter
Address of Go-Getter	Address of Go-Getter
RENEWALS - 1 point each Members Renewed Renewal Points	RENEWALS - 1 point each Members Renewed Renewal Points
NEW MEMBERS RECRUITED - 5 points each New Members New Member Points	NEW MEMBERS RECRUITED - 5 points each New Members New Member Points
Name of 1 New Member:	Name of 1 New Member:
Total 2021 Go-Getter Points	Total 2021 Go-Getter Points
Please add additional Go-Getters on the back of this form.	

Date

Name of Post Officer

Post Officer Title

Name of Go-Getter	Name of Go-Getter
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