



**AMERICAN LEGION, DEPARTMENT OF WYOMING**  
**1320 HUGUR AVE.**  
**CHEYENNE, WYOMING 82001**  
(307) 634-3035 Fax (307) 635-7093  
ADJUTANT@WYOLEGION.NET  
WYOLEGION.ORG

*FOR GOD AND COUNTRY*

**ORATORICAL CONTEST OFFICAL ENTRY**

**SPONSORING POST NAME & NUMBER** \_\_\_\_\_ **located in** \_\_\_\_\_

**ORATOR'S NAME:** \_\_\_\_\_ **AGE** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_ **Phone** \_\_\_\_\_  
Street or Box #, Town, Zip Code

**Orator's email:** \_\_\_\_\_ **Parent's email:** \_\_\_\_\_

**Parent's Name(s)** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Speech Coach's Name (used for prizes)** \_\_\_\_\_

**Date of arrival in Contest Town** \_\_\_\_\_ **Approximate time of arrival** \_\_\_\_\_

**Number of people in your party?** \_\_\_\_\_ **Will you require hotel/motel?** \_\_\_\_\_

**CERTIFICATION OF ELIGIBILITY**

I, \_\_\_\_\_, **certify that** \_\_\_\_\_ **is regularly**  
(Principal, please print your name) (Name of Student, please print)

**enrolled in GRADE** \_\_\_\_\_ **at** \_\_\_\_\_ **High School as of this date, and is**  
(School Name)  
**eligible to participate in this program.**

**Signed:** \_\_\_\_\_, **Principal** \_\_\_\_\_ **High School**

**School's Mailing Address** \_\_\_\_\_ **Phone** \_\_\_\_\_

**POST CERTIFICATION OF WINNER FOR DISTRICT CONTEST**

**Signed:** \_\_\_\_\_, **Printed** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Commander/Representative** \_\_\_\_\_ **Contestant placed:** \_\_\_\_\_

**DISTRICT CERTIFICATION OF WINNER FOR DEPARTMENT CONTEST**

**Signed:** \_\_\_\_\_, **Printed** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Commander/Representative** \_\_\_\_\_ **Contestant placed:** \_\_\_\_\_

**IMPORTANT** - Make four (4) copies of this completed form. Mail one copy to each; your District Commander, Department Oratorical Chairman, and Department Adjutant. Retain one copy for Post records.