

**THE AMERICAN LEGION NATIONAL HIGH SCHOOL ORATORICAL
CONTEST APPLICATION FOR DISTRICT CONTEST**

DATE _____

NAME _____
First Middle Last

ADDRESS _____

CITY _____ STATE _____ ZIP _____

GRADE IN HIGH SCHOOL _____ DATE OF BIRTH _____ GENDER _____

NAME OF HIGH SCHOOL _____

SCHOOL ADDRESS _____

NAME OF SPONSORING POST _____

TITLE OF PREPARED ORATION _____

EMAIL ADDRESS _____

FATHER'S NAME _____
First Middle Last

FATHER'S ADDRESS _____

FATHER'S PHONE _____
Cell Home Work

MOTHER'S NAME _____
First Middle Last

MOTHER'S ADDRESS _____

MOTHER'S PHONE _____
Cell Home Work

ENTRY DEADLINE IS TWO WEEKS PRIOR TO DISTRICT CONTEST

PLEASE SEND THIS APPLICATION TO:

THE AMERICAN LEGION

1314 SW TOPEKA BLVD.

TOPEKA, KS 66612

headquarters@ksamlegion.org