DELEGATE PRE-REGISTRATION

2019 AMERICAN LEGION AUXILIARY SOUTH DAKOTA GIRLS STATE

MAY 27 – JUNE 1, 2019

PLEASE PRINT CLEARLY

DELEGATE _____

Last **First** **Middle** **Birth Date**

Delegate's School Email:_____

Mailing Address _____

_____ _____ _____

City **State** **Zip Code**

I am a Junior at _____

Name of High School

Parent's or Guardian's Signature:_____

PLEASE PRINT CLEARLY

Parent's or Guardian's Email:_____

Parent's or Guardian's Home/Cell Phone:_____

Fill out and return this form by_____**to your local American Legion or Auxiliary:**

Name_____

Address_____

_____

Telephone_____

Email:_____

Approved by
Unit/Post No. _____ **of** _____ **South Dakota**

Fees Paid By _____

COMPLETED FORM & PAYMENT ARE DUE TO
ALA SD GIRLS STATE REGISTRAR BY APRIL 1, 2019!!!

MAKE CHECKS PAYABLE TO: ALA SD GIRLS STATE