

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

DATE _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

FATHER'S NAME _____

FATHER'S ADDRESS _____

FATHER'S HOME PHONE _____ WORK PHONE _____

MOTHER'S NAME _____

MOTHER'S ADDRESS _____

MOTHERS HOME PHONE _____ WORK PHONE _____

GRADE IN SCHOOL _____ AGE _____

NAME OF HIGH SCHOOL _____

SCHOOL ADDRESS _____

NAME OF SPONSORING POST _____

TITLE OF PREPARED ORATION _____

**ENTRY DEADLINE IS TWO WEEKS PRIOR TO DISTRICT CONTEST
PLEASE SEND THIS APPLICATION TO:**

THE AMERICAN LEGION
1314 SW TOPEKA BLVD.
TOPEKA, KS 66612

or

DepartmentAssistantAdjutant@kansaslegion.org