

THE AMERICAN LEGION – DEPARTMENT OF NEW YORK
ORATORICAL CONTEST – DEPARTMENT REPORT

Date of Contest: _____ Number of Contestants: _____
Location of Contest: _____
City: _____

First Place Winner (National Contestant)

Name: _____ Gender: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Telephone Number: _____ Cell Phone Number: _____
Email Address: _____
School Attending: _____ Grade: _____
County: _____ City: _____

<i>For Office Use Only:</i>	\$ _____	Check #:
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Second Place Winner

Name: _____ Gender: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Telephone Number: _____ Cell Phone Number: _____
Email Address: _____
School Attending: _____ Grade: _____
County: _____ City: _____

<i>For Office Use Only:</i>	\$ _____	Check #:
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Third Place Winner

Name: _____ Gender: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Telephone Number: _____ Cell Phone Number: _____
Email Address: _____
School Attending: _____ Grade: _____
County: _____ City: _____

<i>For Office Use Only:</i>	\$ _____	Check #:
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Fourth Place Winner

Name: _____ Gender: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Telephone Number: _____ Cell Phone Number: _____
Email Address: _____
School Attending: _____ Grade: _____
County: _____ City: _____

<i>For Office Use Only:</i>	\$	Check #:
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Fifth Place Winner

Name: _____ Gender: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Telephone Number: _____ Cell Phone Number: _____
Email Address: _____
School Attending: _____ Grade: _____
County: _____ City: _____

<i>For Office Use Only:</i>	\$	Check #:
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