

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

SEND TO DEPARTMENT CHAIR: A copy of this report will be sent to the Department Chair Anthony Paternostro immediately following your contest. Reports can be filled out directly on the computer and either email to PaternosAL@aol.com or faxed to 516-308-7020.

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

First Place Winner (Department Contestant)

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

<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: _____ District: _____

<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: _____ District: _____

<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: _____ District: _____

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