The American Legion College of New York Class of 2025 – SUNY Morrisville June 6 – June 8, 2025

Application – Fillable Format OR Print Legibly

Name:		MF_	Phone: ()	
Address:	-		B A		
State: Zip Code:	_Email:	I HO	14 1		
Years in Legionnaire: SAL SAL	_Aux:	_War Era:		Age:	
Post Name/Number	7731	District:	County:	0	
Leadership Positions Held in the American	Legion:	Part of the	A P	1	
Do you have any food allergies? Yes	No	_ If yes, please exp	olain:	1	
Do you have any physical limitations? Yes_	No	If yes, plo	ease explain:	100	
 Tuition covers two nights' lodging, for Use of Bell Jar or General Post Function. Only one person and tuition per apple. Application Deadline: April 1st, 202. A check for \$300.00 tuition, made paccompany this application. Check result is recommended to complete Ame. 	ds is acceptable lication. 25 bayable to <i>The A</i> number & Total	and encouraged to a merican Legion E of check:	o sponsor member Department of New	York, must	
Mail completed application, with payment t	to: The American	Legion – DNY – 130)4 Park Boulevard –	Troy, NY 12180	
Space is limited to 100 students.		4	-		
College shirts S, M, L, XL \$28.00 - 2 Shirts must be ordered & pd with Application			add. \$10.00 shipp	ing charge	
Shirt Sizes: SML	XL_	2XL_	3XL	_	
I understand that if accepted to The Americ tuition. If I am unable to attend, a suitable su if I am not accepted to the college this year,	ubstit <mark>ute</mark> may be	e selected to attend	l in my place. I als	o understand that	
Signature:		Date:			