



THE AMERICAN LEGION

Department of Delaware

Email Form To: newcastledistrict2@gmail.com

2022 – Oratorical Contest Application

(To be completed by the Contestant)

Contestant Name:	_____	Birth Date:	_____ / _____ / _____		
Address:	_____	City:	_____	Zip:	_____
Home Tel:	_____	E-Mail:	_____		
U.S. Citizen?	Yes _____ No _____	If no, are you a resident alien?	Yes _____ No _____		
Father/Guardian Name:	_____	Day Tel:	_____		
Mother/Guardian Name:	_____	Day Tel:	_____		

School Information

High School:	_____	Grade:	_____		
Address:	_____	City:	_____	Zip:	_____
Tel:	_____	Fax:	_____		
Faculty Contact:	_____	E-Mail:	_____		

I first became interested in the Oratorical Contest when:

I shall abide by all the rules of the Department of Delaware and The National High School Oratorical Contest Committee and follow the instructions of contest sponsors and chairpersons. I hereby attest that my Prepared Oration and Assigned Topic presentations are my original work. If I win the Department of Delaware Contest, I shall commit to the National Contest.

Applicant: _____ Date: _____

Parent/Guardian: _____ Date: _____

Official Use Only:

Sponsored by American Legion Post: _____ District: _____