



THE AMERICAN LEGION

Department of Delaware

Email Form To: newcastledistrict2@gmail.com

2023 – 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: _____