

2025-2026 DEPARTMENT OF FLORIDA PRESIDENT'S VISIT FORM

Robin Watrous

historian@alafl.org

Please return this form as soon as the Department President has visited your Unit/District via E-mail and include pictures and narrative as attachments.

Dates of Visit:	
District Historians Name:	District #
District Historians Phone #	
District Historians E-mail Address:	
District Presidents Name:	
If this was a Unit visit please complete the following Department Historian.	g and E-mail the District Historian and cc: District President and
Unit Historian's Name:	Unit #
Unit Historians E-Mail Address:	
Unit Historian's Phone #	
What was the schedule of events the Department Fagenda or schedule)	President attended during the District/Unit visitation? (Attach
	ng the Department President's visit and send it to the g the visit and include any of the following information.
Please list all facilities, VA Hospitals, Nursing home	es, Legion Posts etc, that were visited.
Did your group donate to the Presidents Project du	ring the visitation Y N Amount\$
Were there any significant gifts presented to the De	epartment President during the visitation? Please list or
describe.	
How many Juniors members were involved during t	he Department President's visit and what was the activity or
event?	

Is there any other useful information that should be included?