AMERICAN LEGION AUXILIARY Department of Florida Junior Activities



Junior and Young SAL Member EVENT REGISTRATION

Name of the Jr. Aux	iliary Member or Young SAL	member	
Member #	Unit or Squa	adron #	
Unit / Squadron Na	me & City:		
Age of Child:	Date of Birth:	Grade:	
Address:			
Phone #	e-mail:		
Emergency Contact	Name & #		
Does the Child hold	an Office (what & at what leve	el)	
below, have a good a	nttitude and willingness to part ould include, but not limited to	spects of the Junior Activities event list rticipate in all activities that include: "For prayers, standing for the Pledge, how	For Goo
	cluding disciplinary concerns, will need to pick the child up	, the youth member will be asked to lead at the meeting place.	ave and
Event:	Da	Date:	
Adults name:	Signature:	::	
Adults Cell #:	Alt. #	# :	