



NATIONAL DELEGATES ASSIGNMENT FORM

District: _____

DELEGATES

	NAME	ADDRESS	CITY, ST., ZIP	PHONE	POST #
1					
2					
3					
4					
5					
6					
7					

ALTERNATES

	NAME	ADDRESS	CITY, ST., ZIP	PHONE	POST #
1					
2					
3					
4					
5					
6					
7					

Please submit this form to Wisconsin American Legion, Attn: Nation Delegates, P.O. Box 338, Portage, WI 53901 **immediately following your Spring Conference** or no later than June 1, 2024. Once received, the individuals listed will be forwarded their packet which will include the housing form, so it is very important to submit as soon as possible. **If** you are submitting the \$35.00 registration, please use a registration form for each delegate and alternate, which you are paying for. **Please list as many possible alternates as you can in the event the Department would need to draft from the pool of alternates to fill vacancies among the delegates.**