



# American Legion Auxiliary

## Department of Washington

It's Time to Celebrate!

## 2024-2025 Convention Registration Form

Event registration and Meals only-

*Hotel Reservation must be made individually with the hotel (see back)*

-----Registration deadline is Jun 1, 2025-----

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Membership # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Unit: \_\_\_\_\_ District: \_\_\_\_\_

Guest(s): \_\_\_\_\_ Affiliation: Legion: ( ) Other: ( )  
(First and last name)

*For members planning to attend the Commanders Banquet, please fill out the Legion Form for that event.*

**How many?**

***Registration Fee to attend event is per person (current DEC and PDP's are excepted)*** \$25.00

***Thursday: C & Y luncheon: Turkey Club Croissant Boxed Lunch*** \$40.00

Our In-House Fresh Roasted Tom Turkey Breast, layered with Swiss Cheese, Sliced Tomatoes, Lettuce, Apple Wood Smoked Bacon and Guacamole, served on a Butter Croissant or our fresh Garlic Herb Wrap. Boxed lunch includes Kettle Potato Chips, Fresh Baked Cookie, and Iced Tea or Lemonade.

***Thursday: States Dinner: Homestyle Buffet Dinner*** \$65.00

Sweet Pea and Smoked Ham Salad, Fresh Fruit Salad with Honey Yogurt Dressing, Fresh Baby Greens with Salad accompaniments of Tomatoes, Cucumbers, Croutons and House-Made Dressings, Roasted Tom Turkey, Orange Glazed Ham, Traditional Mashed Idaho Potatoes w/ Giblet gravy, Savory Sage Stuffing, Caramelized Gingered Carrots. All buffet dinners include a variety of Artisan Bread and Butter & Chef's Choice Dessert. Fresh Ground French Roast Coffee and Assorted Premium Black & Herbal Teas.

***Friday: VA & R Luncheon: Pasta Alfredo with Herb Marinated Chicken*** \$46.00

Starter Salad, Artisan Bread and Butter, Chef's Seasonal Vegetables appropriate to your Entrée, includes a plated lunch with a generous portion of Chef's Choice Pasta topped with a Rich Garlic Cream Sauce and Herb Marinated Chicken. Complete with a plate of Chef's Choice Desserts served family Style on your table and Iced Tea.

(Please make all checks out to: ALA Department of Washington) REGISTRATION and MEALS: TOTAL \$ \_\_\_\_\_

**Special Dietary Restrictions:**

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**Location:**  
**MIRABEAU PARK HOTEL AND CONVENTION CENTER**  
**110 N. Sullivan Rd. Spokane Valley, WA 99037**

**Dates:**  
**The 2024-2025 Department Convention is**  
**Thursday July 10<sup>th</sup> to Saturday July 12<sup>th</sup>, 2025**  
**(with some events taking place on Wednesday July 9<sup>th</sup>)**

**Please book your hotel room as soon as possible.**

We have special pricing at our Convention hotel:  
**Mirabeau Park Hotel and Convention Center**  
110 N. Sullivan Rd. Spokane Valley, WA 99037

**Please only use this phone number (509-924-9000) to make reservations.**  
**Be sure to mention that you are with the American Legion Family when booking.**

\$149.00 for internal room/ \$179.00 for corner room suite  
This rate is available during the following timeframe: July 5-July 15 only.

**June 1<sup>st</sup> is the cutoff date for making your reservations with the hotel.**

**Special Notices**

- Complete the following information for all Auxiliary members and guests who plan to attend the Department Convention, please return it to the Department Headquarters Office at the address below.
- Please complete the 2024-2025 Convention Registration Form and make your own Room Reservation prior to June 1, 2025.
- The Department Secretary is required to register all who plan to attend any portion of the Convention.
- All Auxiliary information will be shared with the Department Secretary for credentialing purposes only.
- All documentation will be destroyed once registration is complete.

**Please advise the hotel if you need ADA accessible facilities, as these are limited.**  
**Rooms go quickly, please do not wait until the last minute to make your room reservations.**

**Send your check made out to ALA Dept of WA, or provide your credit or debit card information here:**

Name on Card (as it appears): \_\_\_\_\_

Card Number: \_\_\_\_\_

Exp: \_\_\_\_\_ CVV: \_\_\_\_\_ Billing Zip code: \_\_\_\_\_

**Please email to: [secretary@walegion-aux.org](mailto:secretary@walegion-aux.org) or Mail to: ALA Department of Washington**  
**P.O. Box 5867**  
**Lacey, WA 98509-5867**

Revised 4/25 sda