

## SCHOOL CONTACTS FOR MAILING

On this form please supply the following information by December 15, 2025

Send to: Arizona Girls State  
American Legion Auxiliary  
Department of Arizona  
4701 North 19<sup>th</sup> Avenue Suite 100  
Phoenix, Arizona 85015

Unit Name & Number \_\_\_\_\_

Girls State Chairman \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

School...Name of person to receive Girls State packet, otherwise it will be sent to Principal/Counselor. We have the school address unless a recent change was made. Most information will be sent by email.

School \_\_\_\_\_

Contact \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

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