

**106th National Convention  
August 22 – August 28, 2025**

**DEADLINE JULY 10, 2025**

This year we will be staying at Hilton Tampa Downtown. Room Rates are \$129.00 plus 13.5% tax. Valet Parking Only is \$29.00. Check in is 4:00 pm and check out is 11:00 AM. **The hotel requires a first night deposit plus tax when a reservation is made, which is \$147.00.** Your card will not be charged until reservations are sent to the hotel.

Date of Arrival \_\_\_\_\_ Date of Departure \_\_\_\_\_

Name: \_\_\_\_\_

Hilton's Honor Number: \_\_\_\_\_

Additional Person Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

\_\_\_\_\_ Please reserve my room with the below credit card information below. I realize that this information will be provided to the hotel for them to use as a guarantee of my arrival.

\_\_\_\_\_

Credit Card Number	Exp. Date	Sec. Code
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\_\_\_\_\_

Billing Zip Code

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**Southern Bloc Breakfast  
(For Legionnaires Only)**

Please reserve me \_\_\_\_\_ tickets for \$60.00 per person. \$ \_\_\_\_\_.

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**Registration**

**Auxiliary and Sons Delegates that are attending must send the Legion \$20.00 to help with the hospitality, because your registration fee is paid for. Legion registration is \$50.00.  
Please register the below.**


Please register \_\_\_\_\_ @ \$50.00 Please register \_\_\_\_\_ @ \$20.00

**Alabama Legion Family Convention Caucus  
Saturday August 23<sup>rd</sup> at 6:00 pm**

Please register me \_\_\_\_\_ @ \$50.00 per person \$ \_\_\_\_\_.

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**National Commander's Banquet  
Tuesday, August 26, 2025**

**LIMITED Number of Tickets**

Please reserve me \_\_\_\_\_ tickets for \$70.00 per person. \$ \_\_\_\_\_

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**Commander's Shirt**

**This year the Commander's shirt is grey and Air Force Blue. We will be wearing this shirt while in our caucus. The shirts will cost \$40.00 each.**

**Size: \_\_\_\_\_ Lady or Men Style: \_\_\_\_\_**

Breakdown on enclosed money

Southern Bloc Breakfast	\$	_____
Registration	\$	_____
Convention Caucus	\$	_____
Commander's Banquet	\$	_____
Commander's Shirt	\$	_____
Total enclosed	\$	_____

\_\_\_\_\_ Check # \_\_\_\_\_

\_\_\_\_\_ Credit Card

Please charge my credit card # \_\_\_\_\_ Expiration Date \_\_\_\_\_  
\_\_\_\_\_ for the total amount of \$ \_\_\_\_\_. My security code \_\_\_\_\_ and my  
billing zip code is \_\_\_\_\_. Please send my receipt to my email address of \_\_\_\_\_.

***If you are using a credit card, please fax forms to 334-262-9694, since we must have numbers off the card to process credit cards.***

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Should you have any questions please do not hesitate to call Department Headquarters and speak to Christy Jones 334-262-6638 or 800-234-5544 or email [christy.jones@legional.org](mailto:christy.jones@legional.org).