

**AMERICAN LEGION BOYS STATE OF VIRGINIA**

**Information Needed about Delegate for On-Line Registration:**

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Student's E-mail \_\_\_\_\_

Student's Cell Phone \_\_\_\_\_

Student's Home Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_

High School Name \_\_\_\_\_

Grade Completed \_\_\_\_\_ (at end of current school year; should be 11<sup>th</sup>)

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Parent or Guardian Last Name \_\_\_\_\_

Parent or Guardian First Name \_\_\_\_\_

Parent or Guardian Cell Phone \_\_\_\_\_

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**Information Supplied by Sponsor for On-Line Registration:**

Sponsored By \_\_\_\_\_

Sponsor's Mailing Address \_\_\_\_\_

Sponsor City \_\_\_\_\_

Sponsor State \_\_\_\_\_

Sponsor Zip Code \_\_\_\_\_

Submitted by Post # \_\_\_\_\_

Post City \_\_\_\_\_

Post District # \_\_\_\_\_

Post Representative's (Printed) Name \_\_\_\_\_

Post Representative phone # \_\_\_\_\_

Post Representative email \_\_\_\_\_