



# The American Legion

## Department of Colorado

7465 E 1st Avenue, Suite D  
Denver, Colorado 80230  
[www.colegionoratorical.org](http://www.colegionoratorical.org)

### DEPARTMENT ORATORICAL CONTEST CONTEST APPLICATION (To Be Completed by Student)

Contestant Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Are you a United States Citizen? ☐ Yes ☐ No

If no, are you a resident alien? ☐ Yes ☐ No

Parents Name \_\_\_\_\_

Day Time Phone \_\_\_\_\_ Email \_\_\_\_\_

### SCHOOL INFORMATION

High School \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School Phone \_\_\_\_\_ School Fax \_\_\_\_\_

Faculty Contact Name \_\_\_\_\_ Email \_\_\_\_\_

I will abide by all the rules of the Department of Colorado and the National High School Oratorical Contest Committee and follow the instructions of contest sponsors and chairman. I hereby attest that my Prepared Oration and Assigned Topic presentations are my original work.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Students should submit this application by November 1, 2023 via email to:  
[colegionoratorical@gmail.com](mailto:colegionoratorical@gmail.com)**

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### OFFICIAL USE ONLY

Sponsored by American Legion Post or District \_\_\_\_\_

Post or District Chairman or Officer \_\_\_\_\_

Phone \_\_\_\_\_ Date \_\_\_\_\_