



American Legion Auxiliary • Department of North Dakota

Flickertail Girls State, Inc.

2017 Registration Form

Name of Applicant: _____

Address: _____

City, State, Zip Code: _____

Phone: _____ Birthdate: _____

Name on Nametag: _____ Email Address: _____

Name of High School: _____ Location of High School: _____

T-Shirt Size: Small Medium Large XLarge 2XLarge 3X Large

Yes No Do you have any dietary, religious or cultural requests?
If Yes, please explain _____

Yes No Are you a US Citizen?

Yes No Are you a member of the American Legion Auxiliary?

Yes No Are you a sister, daughter, granddaughter or great granddaughter of an active duty service member or veteran who served honorably during a time of War? Step-relatives also are applicable. If yes, you may be eligible for the American Legion Auxiliary. Visit <https://www.alaforveterans.org/About/Eligibility> or contact a local American Legion Auxiliary unit for more information.

Yes No Samsung Scholarship Eligibility: Are you a direct descendant (child, grandchild, great grandchild, or legally adopted child) of a US wartime veteran? If yes, you *may* be eligible for the Samsung scholarship. Visit <http://ndgirlsstate.org/scholarships> for more information.

Waiver - must be signed by Parent/Guardian and two witnesses

The undersigned parents/guardian of the above hereby consents to her participation in American Legion Auxiliary Flickertail Girls State at Grand Forks, ND June 11-16, 2017 and does hereby release and discharge the University of North Dakota, American Legion Auxiliary, Department of ND and Flickertail Girls State, Inc., its officers, agents, instructors, and employees from any and all claim for any cause which may arise during the session, or in connection with travel to and from said ALA Flickertail Girls State. The undersigned parents/guardian and the ALA Flickertail Girls State participant expressly grant permission to the American Legion Auxiliary, Department of ND and ALA Flickertail Girls State Inc. to use the image of likeness of the above participant in connection with advertising or marketing this program.

Printed Name of Parent/Guardian: _____

Parent/Guardian Signature: _____ Date: _____

Witness: _____ Date: _____

Unit Approval Information

Each participant needs to be sponsored by a Unit to attend ALA Girls State. If you need a unit to sponsor you and do not have one in your area, contact Girls State Director Cat Olson and she will find a unit to sponsor you.

Unit #: _____ City: _____

Unit ALA Girls State Chairman: _____

Chairman's Address _____ Phone Number: _____

Chairman's Signature: _____ Date: _____

This application must be completed and the enrollment fee and mailed to:

Lauren Hillebrand
2130 9th Ave NW
East Grand Forks, MN 56721

Registration at the early bird rate of \$225 is due by April 1, 2017. Any registrations paid after April 1st, 2017 are \$250 per person. Make checks payable to *ALA Flickertail Girls State*.

Questions? Call ALA Girls State Director Cat Olson at
(701) 314-2460 or email girlsstate@ndala.org
More information can be found at
www.ndgirlsstate.org