

**CERTIFICATE-DELEGATE-ALTERNATE**

<b><u>DO NOT WRITE IN THIS SPACE</u></b>		
SQUADRON NO. _____		
	Entitled _____	Registered _____
DEL. _____	_____	_____
ALT. _____	_____	_____

# FOURTY EIGHTH ANNUAL CONVENTION

THE AMERICAN LEGION, DETACHMENT OF CONNECTICUT CROMWELL, CONNECTICUT  
JULY 10, 2021

The American Legion, Department of Connecticut- Harry R Hansen Jr. - DEPARTMENT ADJUTANT  
This is to certify that \_\_\_\_\_ Squadron No. \_\_\_\_\_ has elected the following delegates and alternates to represent it at the Forty-Eighth Annual Detachment Convention of The American Legion, Detachment of Connecticut.

DELEGATES	ADDRESS	CITY	REGISTRATION FEE \$5.00
<b>Chairman:</b>			
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____

ALTERNATES	ADDRESS	CITY	REGISTRATION FEE \$5.00
<b>Chairman:</b>			
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____

Delegates Registered: # \_\_\_\_\_ Alternates Registered: # \_\_\_\_\_ Total Registered: # \_\_\_\_\_  
 Check enclosed for \$5.00 per Delegate and Alternate as listed above Total Enclosed: \$ \_\_\_\_\_

DATE \_\_\_\_\_ TOWN \_\_\_\_\_ SQUAD NO \_\_\_\_\_

Contact Information: \_\_\_\_\_  
 Name, phone number & e-mail address (if there is a question or problem this person will be contacted)

\_\_\_\_\_  
 Squadron Adjutant Squadron Commander

This form has been prepared and distributed for your convenience. This is the **ONLY** form that will be accepted. Any variations or changes to this form without the expressed written consent of The Department Adjutant is ***strictly*** forbidden.