

Leadership Camp Application
Sponsored by The Sons of The American Legion
July 27 – 31, 2018
Camp Boothe
Greenpond, Alabama 35074

Name: _____ DOB: _____ Age: _____

Address: _____

Phone: _____ Emergency #: _____

Grade: _____ Shirt size: _____ Email: _____

Squadron Name and Number: _____

Your Favorite Activities:

I, the undersigned parent/guardian of _____
In the consideration of the instruction and training given to my son/ward at Leadership Camp,
hereby discharge The American Legion, The American Legion Auxiliary, the officers, instructors,
and employees from any and all claims, demands, or cause of action I may have the reason of
illness, injury, or accident incurred or suffered by said son/ward while attending said Leadership
Camp no matter how caused or occasioned.

Signature: _____ Date: _____
(Parent or Guardian)

Contact #: _____ Email: _____

Address if different from above: _____

This application and registration fee of \$160.00 must be mailed to The American Legion, P O
Box 1069, Montgomery, Alabama 36101 no later than July 14th. Please include a small photo
and copy of insurance card if applicable. Please send a copy of application to Ron Haygood, P.
O. Box 630, Montevallo, Alabama 35115. If you have any questions, please do not hesitate to
call Ron Haygood at 205-910-8566.