

**AMERICAN LEGION FAMILY
12th DISTRICT SPRING CONVENTION
SATURDAY, APRIL 18, 2015**



REGISTRATION FORM

€ Post € Unit € Squadron # _____ submits payment in the amount of \$ _____ for the following members who will be attending the 2015 Spring Convention, April 18, 2015 at **American Legion Post 569** (if necessary, attach a 2nd sheet). Cost is \$25.00 per person in advance. Registration is due by Monday, April 13, 2015. Late registration \$30.00 per person.

NAME:	

FOR THE JOINT MEMORIAL SERVICE, PLEASE LIST ANY POST/UNIT/SQUADRON MEMBERS WHO HAVE PASSED AWAY SINCE THE LAST CONVENTION:

****Note – checks should be made payable to
AL Post 569 (for all entities) and mailed with this form to:
P.O. Box 6193, Fort Worth, TX 76115**