



# AMERICAN LEGION AUXILIARY OF IOWA NATIONAL CONVENTION REGISTRATION

2025 – TAMPA, FL

## Section A: Contact Information

Enter your name as you would like it to appear on your convention name badge.

Name: \_\_\_\_\_  
*First* *Last*

Address: \_\_\_\_\_  
*Address*

\_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *Zip Code*

Mobile Phone: \_\_\_\_\_ I wish to receive text alerts:  Yes

Email: \_\_\_\_\_ Membership ID: \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_  
*First* *Last*

Mobile Phone: \_\_\_\_\_  
*Mobile*

## Section B: Registration

Check one. Use separate form for each registration.

- American Legion Auxiliary Delegate \$ 35.00 \$ \_\_\_\_\_
- American Legion Auxiliary Alternate \$ 35.00 \$ \_\_\_\_\_
- American Legion Auxiliary Guest \$ 35.00 \$ \_\_\_\_\_

District Number: \_\_\_\_\_ Unit No: \_\_\_\_\_

## Section C: Tickets

\_\_\_\_\_ Auxiliary Luncheon Tickets at \$40.00 each \$ \_\_\_\_\_

\_\_\_\_\_ States Dinner Tickets at \$70.00 each \$ \_\_\_\_\_

**Section D: Credit Card Information**

Credit Card Type:  Visa  MasterCard  Discover

Name on card: \_\_\_\_\_  
*First* *Last*

Card Number: \_\_\_\_\_

Expiration Date (MM/YY): \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature \_\_\_\_\_

**Section E: Payment Information**

Payment method:  Check enclosed  Use credit card information above

Payment summary:

Registration Fee: \$ \_\_\_\_\_

Auxiliary Luncheon: \$ \_\_\_\_\_

States Dinner: \$ \_\_\_\_\_

**Total:** \$ \_\_\_\_\_

*Submit form and payment to:*  
**American Legion Auxiliary of Iowa**  
**Attn: National Convention**  
**720 Lyon Street**  
**Des Moines, IA 50309**  
Registration deadline: June 15