



## American Legion Auxiliary (ALA) Missouri Girls State (MGS) 2022 Auxiliary Unit Pledge Form

### Unit Contact Information (Please Print)

Unit Name: \_\_\_\_\_ District #: \_\_\_\_\_ Unit #: \_\_\_\_\_

Unit President Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Girls State Chairman Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Girls State Chairman Street Address:

City: \_\_\_\_\_ State: MO Zip: \_\_\_\_\_

Girls State Chairman E-mail: \_\_\_\_\_

*If no e-mail, write the e-mail address of another Unit officer/member:*

Name: \_\_\_\_\_ Office: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Name of Delegates/Alternates Sponsored for 2022

- |           |                                   |                                    |   |
|-----------|-----------------------------------|------------------------------------|---|
| 1. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 2. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 3. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 4. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 5. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 6. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 7. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 8. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 9. _____  | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 10. _____ | <input type="checkbox"/> Delegate | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 11. _____ |                                   | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 12. _____ |                                   | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 13. _____ |                                   | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 14. _____ |                                   | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |
| 15. _____ |                                   | <input type="checkbox"/> Alternate | <input type="checkbox"/> <i>Jr ALA Member</i> |

*Our ALA Unit is interested in sending more than ten (10) delegates, who are listed above. The Unit will be notified after March 1, 2022, if session vacancies are available. (check box)*

**Send original and 2 copies to:**

American Legion Auxiliary, Attn: ALA MGS, 600 Ellis Blvd, Jefferson City, MO 65101



## American Legion Auxiliary (ALA) Missouri Girls State (MGS) 2022 Contributing Organization Roster

The American Legion Auxiliary Department of Missouri wants to acknowledge and send thanks to those organizations and businesses in the community that have made a financial contribution to help pay all or part of the ALA MGS tuition fees for one or more delegates. A certificate will be created for each business or organization listed below. If the complete address is not listed, the certificate will be sent to the unit representative listed above for distribution.

**If a delegate is assigned/associated with a specific donation, please write the delegate's name with it. If not, leave the delegate name blank.**

Unit #: \_\_\_\_\_ District #: \_\_\_\_\_ Name of Unit: \_\_\_\_\_

Unit Representative Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
Street City Zip

- Create a certificate for our ALA Unit with the name included as written above.  DO NOT create a certificate for the ALA Unit.
- Send all "create" certificates BELOW to ALA unit representative ABOVE who will distribute certificates to organizations. Otherwise all certificates will be sent to the % Contact Name of each organization.

#1 Organization: Street: Delegate Name:	% Contact Name: City, State Zip: <input type="checkbox"/> Create a Certificate <input type="checkbox"/> DO NOT Create a Certificate
#2 Organization: Street: Delegate Name:	% Contact Name: City, State Zip: <input type="checkbox"/> Create a Certificate <input type="checkbox"/> DO NOT Create a Certificate
#3 Organization: Street: Delegate Name:	% Contact Name: City, State Zip: <input type="checkbox"/> Create a Certificate <input type="checkbox"/> DO NOT Create a Certificate
#4 Organization: Street: Delegate Name:	% Contact Name: City, State Zip: <input type="checkbox"/> Create a Certificate <input type="checkbox"/> DO NOT Create a Certificate
#5 Organization: Street: Delegate Name:	% Contact Name: City, State Zip: <input type="checkbox"/> Create a Certificate <input type="checkbox"/> DO NOT Create a Certificate

*\*\*\*If more than 5 contributing organizations should be recognized for sponsorship, please complete multiple copies of this form.*

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American Legion Auxiliary, Attn: ALA MGS, 600 Ellis Blvd, Jefferson City, MO 65101