

AMERICAN LEGION ALASKA BOYS STATE APPLICATION

DATE	HIGH SCHOOL	
NAME		AGE
ADDRESS		
(street or box #)	(City)	(Zip)
PHONEHOME	- <u></u>	-
HOME PARENT OR	CELL/OTHER	
GUARDIAN	ADDRESS	
ARE YOU A U.S. CITIZEN	_ARE YOU A JUNIOR IN HIGH	SCHOOL NOW
HIGH SCHOOL ORGANIZATION	NS YOU BELONG TO	
OFFICES HELD IN THE ABOVE		
LIST OTHER ACTIVITIES OUTS	SIDE SCHOOL	
LIST HOBBIES AND/OR INTERI	ESTS	
CHURCH AFFILIATION OR PRE	FERENCE	
HEALTH: HAVE YOU HAD MED		
DO YOU HAVE ALLERGIES?OTHER		Γ?SKIN DISEASE PROBLEMS ON BACK
OTHER	EAFLAIN	FRODLEMS ON DACK
GIVE 2 PERSONAL REFERENCI	ES (NOT RELATIVES) AND ADD	DRESS
SIGNATURE		