



THE ROYAL CANADIAN LEGION

Ontario Command - Public Speaking Contest

Student Registration Form

Branch No: _____ The Royal Canadian Legion

Branch Address: _____ Phone#: _____

Zone: _____ G - 5 Zone Chairman: _____ Shawn Taillon

Branch Chairman: _____ District Chairman: _____ Tyrone Seeley

Note: Personal Information to be printed by the Student. School information to be completed by the Teacher/Parent.

Please Print Clearly

I wish to participate in the Royal Canadian Legion Public Speaking Contest.

My Topic is: _____ Language: _____

See back for Contest Regulations School Grade: _____ Age: _____

Student's Name: _____

Student's E-Mail Address: _____

Student's Mailing Address: _____

City: _____ Postal Code: _____ Telephone No: _____

School Name: _____ Teacher's Name: _____

School Address: _____

City: _____ Postal Code: _____ Telephone No: _____

Date: _____

(Signature of Student)

I, _____, hereby give my child permission to complete this registration form in full and participate in The Royal Canadian Legion Public Speaking Contest.

Date: _____

(Signature of Parent / Guardian)