

The American Legion P.O. Box 1055 Indianapolis, IN 46206

We further und	The individual nominated repr	resents the best ump	ire involved	in American L	ng umpire for consideration at a National Legion Baseball within this Department. Itional Americanism Division. <i>NOTE</i> :
This form i	is due to National Headq	quarters by Janua	ry 1, and	must be endo	orsed by Department Chairman
Full Name: _	Last	First		Initial	Nickname
Mailing Addi	ress:Street,	City,	State	and Zip -	No P.O. Box please.
Phone #		(Daytime)			(Evening)
Date of Birth	:	Weight:			Height:
Occupation:					
American Le	gion Membership: (Post	#)			
Military Bacl	kground: (Branch of serv	ice and years serv	red)		
Qualifying E	xperiences:				
Previous Leg	ion Tournament Assignn	nents:			
Shirt Size:	Base:	Plate:		Cap	Size:
Email addres	s (if available):				
				Endo	orsed by Department Chairman