



**Junior Member Registration Form  
Mid-Winter  
January 17 & 18, 2025**

County \_\_\_\_\_

District \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

Enclosed is Check # \_\_\_\_\_ in the amount of \$ \_\_\_\_\_

\_\_\_\_\_ # of junior members registered for the 2025 Mid-Winter Conference at **\$50.00 each.**

**Deadline to Register January 06, 2025**

**Please Make Check payable to American Legion Auxiliary Department of New York.**

**Mail to:** American Legion Auxiliary  
1580 Columbia Turnpike, Bldg. 1, Suite 3  
Castleton-on-Hudson, NY 12033

Please note: Junior members must be at least **8 years of age** to attend Junior meetings.

<b>Mid-Winter Conference Registration Name of Member &amp; Date of Birth</b>	<b>Unit # and County</b>

\*Use space on the back of this form if more is needed.

\*\*Please put a star next to all first time attendees.