



American Legion Auxiliary  
Maryland  
Girls State

**APPLICATION**

**Steps to Apply:**

- Step 1: Fill out the **ONLINE Interest Form (Required)** – [www.facebook.com/alamdgs](http://www.facebook.com/alamdgs)
- Step 2: Print and/or fill out application **(Required)** – [www.facebook.com/alamdgs](http://www.facebook.com/alamdgs)
- Step 3: Drop off application at your local American Legion post/unit or return to your school counselor **clearly labeled** Girls State application. **Please note:** Do not mail your application directly to the department office. The application will not be accepted at the department office without a sponsoring **unit cover sheet**.
- Step 4: If interviewed and selected, submit the \$45 registration fee payable to your sponsoring unit; *Method of payment decided by sponsoring unit.*
- Step 5: Attend a **mandatory** orientation session with at least 1 parent or guardian. Dates listed on our website and Facebook page.



**PLEASE TYPE OR PRINT USING YOUR LEGAL NAME AND MAILING ADDRESS**

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Name & Number City, State, Zip

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Graduation Date (Mo./Yr.) \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email (*write clearly*): \_\_\_\_\_ @ \_\_\_\_\_

Social Media (*Check all that you use*): Facebook \_\_\_ Instagram \_\_\_ Twitter \_\_\_ Snapchat \_\_\_ YouTube \_\_\_ LinkedIn \_\_\_

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**SCHOOL CERTIFICATION**

We recommend this student of the **Junior Class** as a candidate for the American Legion Auxiliary Maryland Girls State program. We believe she has the qualifications of character, integrity, leadership, intelligence, and interest that would allow her to be a successful participant in the program.

SCHOOL NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

COUNSELOR'S PRINTED NAME: \_\_\_\_\_

COUNSELOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**APPLICANT'S CERTIFICATION**

If selected, I voluntarily pledge to **obey all the rules and respect the judgment of staff and counselors. I will take an active part in the activities voluntarily or under assignment. I pledge to attend the entire full week of ALA Maryland Girls State.**

SIGNED: (Applicant) \_\_\_\_\_

Agreement of Parent/Guardian: I hereby give my consent for the applicant to attend the ALA Maryland Girls State program. I understand that attendance for the entire full week of the program, including graduation, is a requirement for receipt of the ALA Maryland Girls State Certificate of Participation.

SIGNED: (Parent/Guardian) \_\_\_\_\_

If selected, the \$45 non-refundable registration fee is to be submitted to the sponsoring unit (check made out to the ALA Unit).

**Interest Form Submitted Online and Application Received by your Sponsoring ALA Unit on or before March 22, 2019**



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**QUESTIONNAIRE**

1. ARE YOU INTERESTED IN GOVERNMENT AND CITIZENSHIP?
  
2. SUBJECTS/GRADES (1st semester Jr. year):
  
  
  
3. AWARDS - EITHER SCHOOL OR CIVIC:
  
  
  
  
4. CAREER GOAL(S) IF DETERMINED (or those from which you might choose):
  
  
  
  
5. LIST ANY MEMBERSHIPS IN STUDENT GOVERNMENT, LEADERSHIP PROGRAMS, AND MILITARY ORGANIZATIONS DURING YOUR HIGH SCHOOL CAREER. INDICATE OFFICES & CHAIRMANSHIPS, IF ANY:
  
  
  
  
  
  
  
  
6. REASON FOR WISHING TO ATTEND GIRLS STATE (50 words or less):



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**ORIENTATION AGREEMENT**

I understand that to be eligible to attend ALA Maryland Girls State **I must participate in one of the scheduled mandatory orientation sessions.**

ALA Maryland Girls State Applicant:

Print: \_\_\_\_\_

Sign: \_\_\_\_\_

I understand my daughter **and** one parent/guardian **must attend a mandatory orientation session** to be eligible to attend ALA Maryland Girls State.

Parent/Guardian:

Print: \_\_\_\_\_

Sign: \_\_\_\_\_

**If interviewed and selected**, we will attend the orientation scheduled for

\_\_\_\_\_ Date & Time

located at \_\_\_\_\_  
Post Name, Post #, & City

**\*Please note your picture will be taken at orientation for your badge at ALA MD Girls State**

**\*\*If you haven't been contacted by sponsoring unit at least 1 week prior to your scheduled orientation, please contact the ALA MD Girls State Director at alamdgs@gmail.com**

All orientation locations, dates, and times will be posted on our Facebook page after February 1, 2019.

[www.facebook.com/alamdgs](http://www.facebook.com/alamdgs)



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WAIVER

**NO APPLICATION WILL BE ACCEPTED WITHOUT THIS WAIVER**

As the undersigned parents or guardian of \_\_\_\_\_, a registered student at \_\_\_\_\_ high school, I do hereby state that in consideration of the instructions to be given to her and the training program she is to be involved in, I, as her parent or guardian, do hereby grant and consent that my daughter or ward may participate in all the planned activities of American Legion Auxiliary Maryland Girls State, and I further consent to her participation in all field trips which are to be a scheduled part of the program and curriculum at Girls State.

I also, as the parent or guardian of the above named, do hereby fully release, exonerate, discharge and hold harmless the American Legion Auxiliary, Department of Maryland, its individual officers, agents, instructors, and employees from any and all claims and demands, suits, actions or causes of action, either in law or equity, which I as parent or guardian may have by reason of any illness, injury or accident incurred or suffered by my daughter or ward, \_\_\_\_\_, while she is in attendance at said Girls State no matter how such injury, illness or accident may have been caused or occasioned.

Does your daughter/ward have any physical or emotional condition of which Girls State should be aware? Yes \_\_\_\_ No \_\_\_\_ . If yes, please explain what the condition is and whether it is being treated by a physician.

\_\_\_\_\_  
\_\_\_\_\_

1. ( ) Disability (*Explain*): \_\_\_\_\_
2. ( ) Using Prescribed Medication(s) \_\_\_\_\_
3. ( ) Eating Disorder(s) \_\_\_\_\_
4. ( ) Allergies \_\_\_\_\_
5. ( ) Interpreter \_\_\_\_\_

\_\_\_\_\_  
PARENT/GUARDIAN DATE

\_\_\_\_\_  
PARENT/GUARDIAN DATE