



# ALA Oregon Girls State Application 2025

**JUNE 22-JUNE 28, 2025, DEADLINE TO APPLY IS May 15, 2025**  
**Open to current High School Junior**

Name, (first, last)		email	
Preferred name		Date of Birth	
Mailing Address		City	Zip Code
Phone:		Expected Graduation Date:	
School Name		School Location	
Do you participate in:	<input type="checkbox"/> Band/Chorus <input type="checkbox"/> Debate/Speech <input type="checkbox"/> Student Government <input type="checkbox"/> Sports <input type="checkbox"/> Other:	GPA	Office(s) Held in School

Awards, Activities, and Volunteer Activities inside and outside of school

Future Educational/Career Goals

**Cost to attend Oregon Girls State is \$400.**  
**\$100 application fee and \$300 paid by the unit.**  
**Any unit or sponsor has the option to pay the full \$400 fee.**

**Do you have?**

**1. A Sponsoring American Legion/Auxiliary Unit?**  Yes  No

**ALA Oregon Girls State Rules and Applicant Agreement:**

- I am a legal US Citizen.
- I believe in the constitutional form of government of the United States of America and the principles for which it stands.
- I have respect for and will pledge allegiance to the flag of the United States of America.
- I understand that completing and submitting this application is not a guarantee that I will be accepted to attend Girls State.
- I understand that no applicant will be denied attendance based upon any medical infirmity, handicap, or special needs.

**I hereby acknowledge the above Rules and Applicant Agreement, and agree to abide by the above rules and understand that violation of any or all of these rules is cause for being sent home, and if expelled from the program, I will be required to reimburse the American Legion Auxiliary for fees and costs associated with the dates of my attendance in the program on per diem (per day) basis:**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please indicate shirt size for ALA Oregon Girls State polo shirt:  S  M  L  XL  XXL  XXXL

To be completed by a parent or guardian.	
Name of Parent/Legal Guardian	Relationship to Applicant
Work/Cell Phone	Parent/Guardian email
Alternate Emergency Contact Name:	Emergency Contact phone number:

**Parent/Legal Guardian Permission and Acknowledgment:**

The applicant herein is a legal resident of United States and has my permission to attend ALA Oregon Girls State. She is in good physical and mental condition and may participate in any virtual activity. In case of an emergency, The American Legion Auxiliary can contact me at the number listed above. Upon acceptance to the program, I understand that she must attend the complete program in order to represent that she attended ALA Oregon Girls State. The American Legion Auxiliary is permitted to confirm/deny her attendance at ALA Oregon Girls State with colleges/universities/employers, etc. without prior or further authorization. It is understood that no compensation or fees are to be paid by The American Legion Auxiliary if the applicant's information or likeness is used to promote its programs. I acknowledge that the applicant may be exposed to topics or language of an adult nature. The applicant understands the rules and has agreed not to use and/or participate in: alcohol, tobacco, illegal drugs, gambling, weapons or engage in any illegal activities during her time at ALA Oregon Girls State. I have read the Rules and Applicant Agreement above, and hereby acknowledge and understand that a violation of any of those rules is cause for my daughter to be sent home, and if expelled from the program, I will be required to reimburse the American Legion Auxiliary for fees and costs associated with the dates of her attendance in the program on per diem (per day) basis. I agree to carry medical insurance, indicated above, throughout the duration of the 2024 Girls State program. All medications (listed above: both over the counter and prescription) will be given to the ALA Oregon Girls State Nursing staff upon arrival. I certify the information on this application is correct, complete, and that the applicant meets school certification requirements (below). I hereby release The American Legion Auxiliary, ALA Oregon Girls State, Oregon State University, and all of their members, staff, volunteers and officers from any liability for any harm that the applicant may suffer during or as a result of participation in ALA Oregon Girls State, including but not limited to physical, emotional or psychological injuries, and I will indemnify and hold harmless the above entities from liability for any damage caused to or in the presence of the applicant.

**Parent/Legal Guardian Signature:**

**Date:**

**To be completed by a school official:**

**School Certification:**

I certify that the above applicant is a high school junior or home school (ESD) equivalent. She meets the following requirements: a) Was selected from the current Junior; b) Has qualities of leadership, character, scholarship, service, citizenship, and sportsmanship; c) Is physically able to participate in all phases of an active program (unless specified above), and; d) Is committed to be present for the entire session.

**Printed Name and title:**

Signature

Date

**FOR STUDENTS:**

**Do you have?**

1. A Sponsoring American Legion Auxiliary Unit or Post?  Yes  No

If "yes": Auxiliary Unit or Post name and number: \_\_\_\_\_

2. A private sponsor will be paying the \$100 fee?  Yes  No

If "yes": Sponsor's name: \_\_\_\_\_