Department of Delaware
2026 Oratorical Contest Application

Email to: americanlegionoratorical@gmail.com

- or -

Mail to: PO Box 59, Claymont, DE 19703

Phone: (302) 524-9115

Contestant Name:_____ **Date of Birth:**_____

Address:_____ **City:** _____ **State:**_____ **Zip:** _____

Home Phone: _____ **Email:** _____

U.S. Citizen? Yes___ **No:**___ **If no, are you a resident alien? Yes**___ **No:** ___

Father/Guardian Name: _____ **Daytime Phone #:**_____

E-mail: _____

Mother/Guardian Name: _____ **Daytime Phone #**_____

E-mail: _____

==========School Information==========

High School: _____ **Grade:** _____

Address: _____ **City:** _____ **State:**_____ **Zip:**_____

Telephone: _____ **Fax:**_____

Faculty Contact Name:_____ **Email:**_____

Please complete the following: "I first became interested in the Oratorical Contest when:…

Please read, and certify below:

I shall abide by all the rules of the Department of Delaware and of The National High School Oratorical Contest Com and follow the instructions of contest sponsors and chairpersons. I hereby attest That my Prepared Oration and Assigned Topic presentations are my original work. If I win the Department of Delaware Contest, I shall commit to the National Contest.

Signatures: Applicant:_____ _____Date:_____

Parent/Guardian: _____ _____ Date: _____

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Official Use Only: Sponsored by Post:. _____ District: _____