



THE AMERICAN LEGION
DEPARTMENT OF IOWA
DEPARTMENT COMMANDER VISITATION REQUEST

To request commander, please complete this visitation questionnaire below and return it to the either of the addresses listed at the bottom of the form.

Date of Event: _____
Place of Event: _____
Time of Event: _____

Chairmen for the event: _____

Phone #: _____ Email: _____

Type of event: _____

Address of event: _____

City: _____ Zip: _____

May I bring a guest? _____ Am I to speak? _____

Speaking topic (if applicable): _____

Time allotted: _____

What is the attire for the event? _____

If housing is provided, where it is? _____

Confirmation # (if applicable): _____

Other pertinent information: _____

Please send this completed form either by mail or email to:

The American Legion
Department of Iowa
720 Lyon Street
Des Moines, IA 50309

info@ialegion.org