

POST CHILDREN AND YOUTH REPORT

Department of NH American Legion Children and Youth Award

Post Name _____ Post No. _____ District No. _____
 Location _____ Present Membership _____
 Title/Name/Address Making Report: _____

Do you have a Post Home? Yes No
 Date _____ Signature _____

Post MUST file a Consolidated Post Report Form to Department Headquarters
 INCLUDE ALL PROGRAMS THAT HAVE TO DO WITH CHILDREN AND YOUTH!

	Post Expense	Service Hours	# Youth Served	Used Post Home
1) Children Youth Safety Programs	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
2) Temporary Financial Assistance	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
3) Donation to Sports Programs				
Post sponsored (other than AL Baseball)	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other than American Legion sponsored	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
4) April Children and Youth Month				
Department project	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
District project	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Post project	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
5) Community Children Projects				
Legion sponsored	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other than American Legion sponsored	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
6) Other C/Y events not mentioned				
_____	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	\$ _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Totals	\$ _____	_____	_____	

FUND RAISING EVENTS FOR CHILDREN AND YOUTH PROGRAMS

Event Name	Funds Raised	Service Hours	Used Post Home
	\$ _____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
	\$ _____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Totals	\$ _____	_____	

***** Submit a copy of this report to your District Children & Youth Officer, as District awards are given out based on your Post Children & Youth reporting.

MUST BE SUBMITTED AT DEPARTMENT HEADQUARTERS NO LATER THAN April 1
 Accepted by the Department Executive Committee November 12, 2003