



NATIONAL CONVENTION RESERVATION FORM  
AUGUST 21-26, 2025 HOTEL TAMPA RIVERWALK, FLORIDA

**ALL ROOMS MUST BE RESERVED THROUGH DEPARTMENT HEADQUARTERS!**

**FORM WILL BE RETURNED IF ANY REQUIRED INFORMATION IS MISSING!**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

**PHONE (REQUIRED)** \_\_\_\_\_ POST \_\_\_\_\_ DISTRICT \_\_\_\_\_

**HOTEL INFORMATION**

All rooms are located in the HOTEL TAMPA RIVERWALK. Rates quoted include 13.5% tax PLUS \$1.70 per room/night. A check for a one night deposit or credit card **MUST ACCOMPANY THIS FORM** in order to guarantee your reservation.

ARRIVAL DATE \_\_\_\_\_ DEPARTURE DATE \_\_\_\_\_ NO. OF PEOPLE IN ROOM \_\_\_\_\_

PLEASE CHECK ONE: KING (1-2 people) \$148.12 \_\_\_\_\_ DOUBLE (1-2 people) \$148.12 \_\_\_\_\_  
ADDITIONAL OCCUPANTS (after two) IN ROOM \$20 PER PERSON /DAY

**(NOTE: NO SMOKING IN THE HOTEL VIOLATORS WILL BE FINED)**

DO YOU REQUIRE A HANDICAP ACCESSIBLE ROOM? \_\_\_\_\_ YES \_\_\_\_\_ NO

NAME(S) OF OTHER(S) SHARING ROOM \_\_\_\_\_

**EMAIL ADDRESS (REQUIRED)** \_\_\_\_\_

**PAYMENT INFORMATION\* - MUST MARK ONE \*ONLY HOTEL ROOMS MAY BE GUARANTEED BY CREDIT CARD.**

- Check enclosed (**payable to: PA American Legion**) for a one-night deposit in the amount of \$148.12.
  - Guarantee by credit card
    - Visa  MasterCard  Amex  Other
- Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

**NATIONAL COMMANDER'S BANQUET**  
**BANQUET TICKETS MUST BE PAID FOR BY CHECK**

\_\_\_\_ Legionnaire \$45 each = \_\_\_\_\_

\_\_\_\_ Legionnaire's Spouse \$45 each = \_\_\_\_\_

\_\_\_\_ Other \$70 each = \_\_\_\_\_

TOTAL = \_\_\_\_\_  
**Check ONLY**

**REGISTRATION FEE**  
**REGISTRATION FEES MUST BE PAID FOR BY CHECK**

\_\_\_\_ Delegate / Alt \$35 each = \_\_\_\_\_

\_\_\_\_ Guest \$35 each = \_\_\_\_\_

\_\_\_\_ SAL \$35 each = \_\_\_\_\_

TOTAL = \_\_\_\_\_  
**Check ONLY**

**YOU MUST BE REGISTERED AS ONE OF THE ABOVE IN ORDER TO GET INTO CONVENTION HALL AND EXHIBITS. THIS IS NATIONAL'S RULE!**

PLEASE COMPLETE THIS FORM IN FULL AND RETURN WITH PAYMENT (checks payable to PA American Legion) TO:

THE AMERICAN LEGION  
ATTN: NATIONAL CONVENTION REGISTRATON  
PO Box 2324, Harrisburg, PA 17105  
(717) 730-9100  
FAX: (717) 975-2836

**AMOUNT YOU OWE -**  
**CHECK PAYMENTS ONLY**

**HOTEL ROOM** (only if paying by check) \$ \_\_\_\_\_

REGISTRATION FEE(S) \$ \_\_\_\_\_

NAT'L COMMANDER BANQUET \$ \_\_\_\_\_

FINAL TOTAL DUE \$ \_\_\_\_\_

**DEADLINE FOR RESERVATIONS: JULY 7, 2025**

**Parking Rate per Day: \$20.00 - Valet Only**

**\*\*EMERGENCY CONTACT AND PHONE\*\*:** \_\_\_\_\_