



American Legion Auxiliary  
Department of California



**2022-23**  
**Children and Youth Program**  
**December Bulletin**

Holiday Greetings to Each and Every One of You!!

By now all Unit Children and Youth Chairmen have submitted mid-year reports and supplementals to their District chairmen, and this Conductor is looking forward to reading about the many wonderful accomplishments achieved in the C/Y program, as reported by District Chairmen. Don't forget – **December 15<sup>th</sup>** is the deadline for you to send me your District reports!

In her latest bulletin, Western Division Children and Youth Chairman Pam Seelye advised that The Sons of the American Legion Wisconsin Detachment have in place the "Operation American Legion Family" program which offers a cute, soft, cuddly companion that can help children whose lives have changed because they have either a parent or parents who are deployed. These companions can help provide comfort and help them through a difficult time. The adorable pup is ready whenever and wherever the need arises and can also be used as a comfort tool for hospitalized children and those facing other difficult situations.



The dogs can be ordered from the Wisconsin Detachment at [alf@wisal.org](mailto:alf@wisal.org). A donation of \$10 per dog (including shipping costs) is suggested.. Please remember that the focus of this program is for children with deployed parents or children who are ill. Consider ordering several puppies to have on hand for use when a situation presents itself. The order form is attached to this bulletin.

With Christmas just around the corner Units are encouraged to remember our children. This could be a Christmas party with a special guest who wears red. Or, adopt a military family and provide them with dinner and gifts to make their holiday merry and bright. Other ideas would be to pack Christmas stockings with goodies; hold a children's cookie exchange; have children make holiday cards for veterans in hospitals or care facilities. Just do whatever you can to make this Christmas special for our children!

Units are asked to send me pictures of their children's holiday activities at [rednanasue1@comcast.net](mailto:rednanasue1@comcast.net), and please make sure to keep on file a signed permission slip for any photos submitted. A copy of the **Consent For Use of Picture and/or Voice Form** accompanies this bulletin. All pictures must be emailed in either .pdf or .jpg format in the highest resolution possible, and please include the Unit Name and # and identify adults in the photos. If identifying Junior members and/or minor children please use first names only! Your photos could very well be featured on the big screen at National Convention during the Children and Youth report!!!

Wishing each of you a very Merry Christmas and a Happy New Year!

Susan Baker, Children and Youth Chairman  
831-324-0191  
[rednanasue1@comcast.net](mailto:rednanasue1@comcast.net)



# OPERATION A.L.F.

American Legion Family



The American Legion Family

## Providing caring comfort to children whenever and wherever needed

Whether it be a child hospitalized for a serious medical issue or the children of deploying parents, the Wisconsin Sons of The American Legion are proud to provide an A.L.F. puppy to children who need a soft cuddly companion to help them cope with difficult times in their lives.



If you would like to partner with us in this great project, we will gratefully accept whatever cash donation you would like to make.

Please note: Our puppy cannot be sold for profit or used as a fundraiser.

Suggested donation is \$10 per puppy/25 dogs per case

For more information contact Bob Sirovina, 414-881-0721, email: [wisalcmdrbob@att.net](mailto:wisalcmdrbob@att.net)

SQUADRON/POST/UNIT NAME & NUMBER _____	
CONTACT NAME _____	EMAIL _____
ADDRESS _____	
CITY, STATE, ZIPCODE _____	PHONE _____
DONATION AMOUNT _____	

MAKE CHECK PAYABLE TO: SAL-WI SEND TO: Bob Sirovina, 9428 W Eden Pl, Milwaukee, WI 53228

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**CONSENT FOR USE OF PICTURE AND/OR VOICE**

NOTE: The information requested on this form is solicited under the authority of title 38, United States Code. The execution of this form does not authorize disclosure of the materials specified below except for the purpose(s) stated. The specified material may be used within the American Legion Auxiliary for authorized purposes, such as for education of or promotion of the American Legion Auxiliary.

Contact information for individual being photographed or recorded

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

I hereby voluntarily and without compensation authorize pictures and/or voice recording(s) to be made of me (or of the above-named individual if the individual is legally unable to give consent). *(specify the name of the event, newspaper, magazine, television station, website, etc.)*

Name of Event: \_\_\_\_\_

Name of Newspaper, Magazine, television station, website: \_\_\_\_\_

**I understand that the said picture, video and/or voice recording is intended for the following purpose(s):**

Describe the activity, if any to be photographed or recorded:

\_\_\_\_\_

\_\_\_\_\_

**I authorize disclosure of the picture and/or voice recording to** *(specify name and address of the organization, agency, or individual(s) to whom the release is to be made)*

Signature of Individual or other Legally Authorized Person \_\_\_\_\_ Date: \_\_\_\_\_

*I have read and understand the foregoing and I consent to the use of my picture and/or voice as specified for the above-described purpose(s). I further understand that no royalty, fee or other compensation of any character shall become payable to me by the American Legion Auxiliary for such use. I understand that consent to use my picture, video and/or voice recording is voluntary and understand that I may at any time exercise the right to cease being filmed, photographed or recorded, and may rescind my consent for up to a reasonable time before the picture, video or voice recording is used.*

Signature of Interviewer or Individual obtaining Consent:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

**IMPORTANT:** This form must always be completed prior to the making or using pictures, video or voice recordings for publication for American Legion Auxiliary Junior member/s