



Student Writing Contest Entry Form
Staple this form behind your entry.

Name (print): _____

Age: _____ Grade: _____ Male: _____ Female: _____

Type of Submission: Poetry _____ Fiction _____ Nonfiction _____

Title of Piece: _____

E-mail: _____

Home Phone Number: _____

Home Address: _____

City: _____

Zip Code: _____

School: _____

English Teacher: _____

Parent/Guardian name (print): _____

I, _____, being the parent or guardian of the above-named minor, give my permission for him/her to participate in this contest. I understand that I may pick up his/her work after the contest from November 11 through November 15 at the South St. Landry Parish Community Library.

Pledge of Originality: I promise that the work that I am submitting to the Festival of Words Writing Contest is my own original work.

Student Signature: _____