2017 District 6920 Rotary FOUR-WAY Speech Contest

Student Registration Form:

Name: _____

Home Address: _____

_____

Telephone: Home _____ Cell _____

E-mail address: _____

High School Name and location:_____

_____

Circle grade level below:

9th 10th 11th 12th

High School principal name: _____

High School principal email: (optional)_____

Student Assurance:

I agree to attend the contest as noted on the attached press release and to abide by all ground rules set forth for the contest.

Signature of Student _____

Parent or Guardian Permission:

I give permission for my child to participate in the Rotary Four Way Speech contest as described above.

Signature of Parent/Guardian _____

Return this form by email or mail to:

LaVerne Gold
President/CEO
United Way of the CSRA
1765 Broad Street
Augusta, GA 30904
lgold@uwcsra.org