Young Writer's Golden Pencil Contest

Submission Form
(must be filled out for each entry)

Child's Name: _____ _____
First name Last name

Child's Age: _____ Child's Grade: _____

Child's School: _____

Parent's Name: _____ _____
First name Last name

Address: _____

City: _____ State: ___ Zip: _____

Email: _____

Phone: _____

Story Category (please select one):

☐ Animals ☐ Family ☐ Sports ☐ Adventure ☐ Biography
(Biography entries must be someone the child personally knows or an autobiography).

☐ Parents, by checking this box, you are giving your permission for your child to enter this contest. You are verifying that the submission is the original, unpublished work of your child. You are agreeing that the Young Writer's Golden Pencil Contest may reproduce his/her entry without payment to your child other than the prize awarded.

To submit a story/book, please do the following:
Fill out this submission form (you can also submit online at www.goldenpencilcontest.org)
Submit the entry along with a entry fee of $10.00
(please make checks payable to Young Writer's Golden Pencil Contest)
Mail this form, the entry, and check, to:

Young Writer's Golden Pencil Contest
6826 Lackman Road
Shawnee, KS 66217

Contact Information: Mrs Laura Burch, contest coordinator. 913-631-0637, fax 913-631-4492
Email: questions@goldenpencilcontest.org , Website: www.goldenpencilcontest.org