





# ENTRY FORM

Please return your completed form with a check or money order to:  
**KIWANIS of Paulding**  
**P/O Box 94**  
**Paulding, Ohio 45879**

CONTESTANT NAME (S)	AGE	GRADE	PARENTS NAME
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

**\* If your entry should win, please note that the monetary award will be divided among the number of entries in your group. Example: If you have a group of 5 and you win a \$100.00 prize, each member would receive \$20.00)**

CONTESTANT #1 MAILING ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_

TELEPHONE# HOME: \_\_\_\_\_ CELL: \_\_\_\_\_

SCHOOL ATTENDED: \_\_\_\_\_

TYPE OF ACT: [SONG, DANCE, THEATRICAL, ETC.]

\_\_\_\_\_  
 \_\_\_\_\_

ACCOMPANIST [IF ANY]: \_\_\_\_\_

NAME OF ACT: \_\_\_\_\_

COMPOSER: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Please print clearly a short biographical sketch. Include teacher names and years of study within your performance field. Also, tell us about other interests, school, community involvement, church and your educational and career aspirations. Please send a photo, 4x6 or smaller with your entry, these will be returned.