Official Use Only

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2009 Patrick Henry College Short Story Competition Entry Form

Entrant's Name: _____ Birthdate: ___/___/___

Address: _____ State: ___ Zip Code: _____

Phone Number: (___) ____-_____ Email: _____

First Story Title: _____ Word Count: _____

If sending two entries:
Second Story Title: _____ Word Count: _____

Check One:

☐ First Division (ages 12-15)

☐ Second Division (ages 16-18)

Entry Format:

☐ Paper Copy ☐ MS Word document (email)

Entry fee (make checks out to "Patrick Henry College," and write "2009 PHC Short Story Competition" in the memo line):

☐ I have included my one (1) entry and $10 payment with this form.

☐ I have included my two (2) entries and $20 payment with this form.

By signing my name below, I certify that the information provided above is accurate and complete to the best of my ability. I certify that the short story being submitted is the entrant's own creation and not copied from any other source. I agree to abide by the guidelines of this contest and understand that all judgments are final and interpretation of the guidelines is at PHC's sole discretion. Entries will not be returned. I understand that by submitting my short story, I am giving PHC the right to publish my work in future publications.

_____ _____

Entrant's Signature Date Parent's Signature (if under 18) Date