



# SECONDARY SCHOOL WASTEWATER SPOKEN WORD COMPETITION 2017

## ENTRY FORM

**Age: (Tick one)**

Age: \_\_\_\_\_

### PERSONAL INFORMATION:

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of School: \_\_\_\_\_

School Address: \_\_\_\_\_

School Principal: \_\_\_\_\_

School Contact Number: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Contact Number: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

### THE ENTRY:

Spoken Word Title: \_\_\_\_\_

Items submitted: CD /AUDIO  CD / VISUAL  WRITTEN PIECE

TAPE  DVD

OTHER: \_\_\_\_\_

Agreement: I, \_\_\_\_\_ the artist, confirm that I am the creator of the spoken word piece submitted. I agree to give permission to the Water and Sewerage Authority of Trinidad and Tobago to use the piece submitted for promotional purposes in their publications or website.

***This form must be accompany each Spoken Word entry submitted to WASA. Submission of a Spoken Word piece without this form will disqualify student.***

**Thank you for participating.**