



**YOUNG AUTHORS
CONTEST COVERSHEET
2022 – 2023**

Please print clearly. Information will be used for digital publication.

Student/Author's Name: *Must be included	Student's name <i>as it should appear in the publication</i>
Home Address:	<i>(Street, city, state. zip)</i>
Home Phone:	
Parent's Email Address: *Must be included	
Teacher's Email Address:	
School Name & Address: (Full Address with zip code)	
Grade: Teacher: (First & Last Name)	Grade: _____ Mr./Mrs./Ms. (circle one) _____
Local Reading Chapter: *Must be included	Anne Arundel County Literacy Chapter
Title of Entry:	Title: <i>Circle one:</i> POEM (P) SHORT STORY (SS)

Parent Permission

I, _____, attest to the authenticity of my child's
Print first and last name
 original work and give permission for SoMLA representatives to publicize my child's name and reproduce his/her work in an anthology of writing in the event (s)he becomes a state winner.

Parent Signature: _____ **Date:** _____

For local chapter coordinator's use only:

Entry Type & Judging ID Number (ie-"P1" or "SS4"):
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