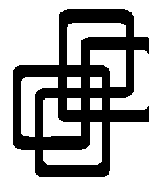


Short Story Entry Form



Pickering
Public
Library

FAMILY INFORMATION

Family Address	Unit/Apt.	City	Postal Code
Parent/Guardian's Name	Parent/Guardian's Phone	Email	

PARTICIPANT INFORMATION

Last Name	First Name	Birth Date (MM/DD/YYYY)	<input type="checkbox"/> Male <input type="checkbox"/> Female
School Grade		School Name	

Personal information contained on this form is collected under the authority of the Municipal Act and will be used for the purpose of this program. Questions about this collection should be directed to the Director of Public Services at One the Esplanade, ON L1V 6K7 – 905.831.6265 ex.6251.

Signature of Guardian

I hereby give permission to the Pickering Public Library to use the creative work submitted for this contest as they require. Writer will be credited for work with first name and age only.

Short Story Writing Contest

The Library invites young writers to enter our Short Story Contest.

- The short story must begin with the line, **“Maybe it was my imagination but yesterday I looked through the library window and I thought I saw...”**
- Writers must live in Pickering, attend school in Pickering, or have a valid Pickering Public Library card.
- The short story can be no more than two pages long and must be accompanied by this entry form.
- Our distinguished panel of judges will select winning entries from four categories: JK to SK, Grades 1 to 3, Grades 4 to 6, 7 to 8, and 9 to 12
- All winning entries will be published on the Library's website.
- To submit your entry you may drop it off at your local library branch starting Monday, March 1st, 2010.
- Contest ends at 9:00 p.m. on Friday, March 19th, 2010.
- To submit your entry you may drop it off at your local library branch