



THE SOUTH CAROLINA YOUNG POETS PRIZE ENTRY FORM:

Name: _____

Permanent Address: _____

Phone Number: _____

Email (if applicable): _____

School Affiliation: _____

Age: _____

Title(s) of the poem(s): _____

Please read the following statement and sign at the bottom:

The work I am submitting is my own and has not been published elsewhere. All of the information on this form is correct. I understand that my poems will not be returned, and I have not sent originals. I have read the guidelines for the South Carolina Young Poets Prize, and I understand those guidelines.

Parent or Legal Guardian: _____
(Please sign if child is under 18)