

## Story Submission Form

I agree to allow my child's Young Writers Workshop story be published on www.meddybemps.com. I understand that my child's story may not be selected and will not be returned. I understand that if my child's story is selected and published, a Young Writers Workshop T-Shirt will be sent to me to give to my child at the address given below, but but that no money will be paid.

Signed (by child's parent or guardian)

\_\_\_\_\_ Date \_\_\_\_\_

### Please print the following information

Child's first name: \_\_\_\_\_

First Initial of last name\*: \_\_\_\_\_ Age: \_\_\_\_\_

Gender:  Girl  Boy (Sometimes, we can't tell from his/her name alone)

Shirt size:  Youth Small  Youth Medium  Youth Large

Parent's/Guardian's name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

email address: \_\_\_\_\_

**If your child's story might be difficult for someone unfamiliar with his or her writing to read (us), please print his or her story on the back of this page.**

Thanks!

Jerry and Susan Jindrich

**\*Privacy Policy:** to safeguard your child, we will not show the child's last name online. Nor will we use or share any of the information you provide other than to mail a shirt to you if we publish your child's story. We ask for your email address in case we have a question about the story or difficulty reading your mailing address.