



Student/Author's Name: *Must be included	Student's name <i>as it should appear in the publication</i>
Preferred Pronouns:	Circle one: he/him she/her they/their
Home Address:	Street address: city, state. zip:
Home Phone:	
Parent's Email Address: *Must be included	
Student Email Address (Optional)	(For high schoolers only)
Teacher's Email Address:	
School Name & Address: (Full Address with zip code)	
Grade:	
Teacher: (First & Last Name)	Mr./Mrs./Ms. (circle one) _____
Local Reading Chapter: *Must be included	Howard County Literacy Association
Title of Entry:	Title: Circle one: POEM (P) SHORT STORY (SS)

I, _____, attest to the authenticity of my child's
Print/type 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.

For local chapter coordinator's use only:

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