

The Year of Languages 2005 Poster Contest

OFFICIAL ENTRY FORM

Attach the following entry form to each poster: (make copies as needed)

*Name_____

*School_____

*Grade_____ *Language Studied_____

*Language Level_____

*Language Teacher's
Name_____

*Parent/Guardians
Name_____

*Mailing Address_____

Phone Number: *day_____ *evening_____
other_____

I understand that the entries will not be returned and will become the property of the Hawaii Association of Language Teachers upon submission. The poster committee and selection panel reserve the right to publish and use the entries to promote The Year of Languages 2005. Information about the students, teachers, institutions and other related people and places will be used appropriately to support the publication and dissemination of the artwork collected and selected.

Student Signature_____ Date_____

Parent/Guardian
Signature_____ Date_____

Submitting Language Teacher
Signature_____ Date_____