



Short Story Competition
Funded by the National Lottery Distribution Trust Fund

Entry form

Name and surname: _____

School/institution/company: _____

Are you a disabled/differently-abled writer: (please circle) Yes / No Specify:

Address (postal): _____

Address (physical): _____

Email: _____

Telephone: _____

I enter the 2011/2012 Chaeli Campaign Short Story Competition fully understanding that:

My entry will not be returned and may be used by The Chaeli Campaign for promotional purposes and may be published, for which I will seek no compensation other than the category cash prize that may be awarded to me.

In the event of my story being published, I give permission for my full name and age to be published with my story.

Signature

Date:

Print name: _____

