

Book Week 2013

# WRITING CONTEST

## Entry Form

[ please print clearly ]

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Gender (Male or Female): \_\_\_\_\_

Name of parent or guardian: \_\_\_\_\_

Parent/Guardian Telephone: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Send your stories or poems, *postmarked* by **February 1, 2013**, to:

Writing Contest  
c/o The Canadian Children's Book Centre  
Suite 217, 40 Orchard View Blvd.  
Toronto, Ontario M4R 1B9

