



Entry Form
Margery Carlson and Marel Brown Youth Contests
Georgia Poetry Society

Name of Poet _____

Name of Poem submitted _____

Poet's Age _____ Poet's grade in school _____

School Name _____

School address _____

City _____ Zip + four _____

School telephone number _____ - _____ - _____

Sponsoring teacher _____

Sponsoring teacher email _____

I certify that:

___ I have read, or had explained to me the rules for this contest. I understand them and agree to abide by them.

___ I certify that this poem is my original work and has not been copied in part or whole from any author's poems in print or on the internet.

Poet's signature _____

Teacher's signature _____

BE SURE TO ATTACH 3 COPIES OF THE POEM, one with name and one without name and mail to:

Elizabeth Howells, GPS Youth Contest Chair
1090 Holly Point Way
Watkinsville, GA 30677