Pro-Life Oratory, Essay and Video Contest Application Form

(Please print neatly)

Student's Name:_____Age:_____Grade:_____

Address:_____

Phone number:_____Email:_____

School Name:_____

School Address:_____

Student's Signature:_____Date:_____

Parent's Signature:_____Date:_____

How did you hear about the contest? (e.g. church, school, newspaper, friend):_____

_____

Sponsoring Organizations: Louisiana Right to Life

Shreveport-Bossier City Coordinator: **Kandace Landreneau**
Louisiana Right to Life College Director
kandace@prolifelouisiana.org
318.218.7030

Students return this form to the coordinator above via email.