



OzKids Entry Form

OzKids Young Australian Writers Awards

Your Details

First Name: Last Name:

Date of Birth: Male Female

Email:

Contact Number:

Your School Details

School:

Suburb or Town: Post Code:

Teachers Name:

Entry Details

Title of Piece:

Number of Words: Story Poetry

Age Section: Junior: Grade 1 - 5 Middle: Grade 5 - Year 8 Senior: Year 9 - 12

Please enter you story or poem on the following pages provided

Return Details

Post:

Please mail your piece of work with this form to:
Australian Children's Literary Board or ACLB
Ltd P.O. Box 267,
Lara Vic. 3212

Email:

Please forward this completed form to;
info@ozkids.com.au

Your Entry

