2009 HISTORY DAY ENTRY FORM

CHECK YOUR DIVISION: _______ SENIOR DIVISION _______ JUNIOR DIVISION

CHECK ONE: _______ INDIVIDUAL CONTEST _______ GROUP CONTEST (put additional members names on back of this form)

SCHOOL NAME: _________________________________________________________

____: HISTORICAL PAPER
Title:_______________________________________________________________

____: PROJECT
Title:_______________________________________________________________

____: PERFORMANCE
Title:_______________________________________________________________

____: MEDIA
Title:_______________________________________________________________

____: WEB PAGE
Title:_______________________________________________________________

Materials That I will need please check.

_____ Electrical Outlet _____ Table Space _____ Floor Space _____LCD Projector

Student Information: (For groups, put group leader information here and additional members’ information on Back)

Name: ____________________________________________________________ GRADE____

(First) (Middle)

Home Address: ______________________________________________________

____________________________________________________

Home Phone: ______________________________________________________

Parents’ Names:____________________________________________________

School Information:

School Name: ______________________________________________________

Teacher: __________________________________________________________

(First) (Last)

Address: __________________________________________________________

Email: _____________________________________________________________

I affirm that the entry submitted for competition was researched and developed during the school year. I understand that History Day Committee and sponsors will not be responsible for loss or damage to exhibits and personal belongings during the day's activities.

Student Signature: ____________________________ Date: __________

Parent’s Signature: ____________________________ Date: __________

Teacher’s Signature: ____________________________ Date: __________
GROUP MEMBERS:

**Student Information:** _____ Grade

Name: __________________________________________________________

(Last) (First) (Middle)

Home Address: __________________________________________________

_______________________________________________________

Home Phone: _________________________________________________

Parents' Names: ________________________________________________

**Student Information:** _____ Grade

Name: __________________________________________________________

(Last) (First) (Middle)

Home Address: _________________________________________________

_______________________________________________________

Home Phone: _________________________________________________

Parents' Names: ________________________________________________

**Student Information:** _____ Grade

Name: __________________________________________________________

(Last) (First) (Middle)

Home Address: _________________________________________________

_______________________________________________________

Home Phone: _________________________________________________

Parents' Names: ________________________________________________

**Student Information:** _____ Grade

Name: __________________________________________________________

(Last) (First) (Middle)

Home Address: _________________________________________________

_______________________________________________________

Home Phone: _________________________________________________

Parents' Names: ________________________________________________