



CLASSROOM SWEEPSTAKES: Entry Form



Type or print legibly

Teachers Name \_\_\_\_\_

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

School Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ School Phone (\_\_\_\_\_) \_\_\_\_\_

Circle Grade:      Kindergarten      1st Grade      2nd Grade      3rd Grade

Total Number of Entered Stories for Classroom: \_\_\_\_\_

Story Listing (please add additional lines as needed):

Student Name: \_\_\_\_\_ Title of Story \_\_\_\_\_

Student Name: \_\_\_\_\_ Title of Story \_\_\_\_\_

Student Name: \_\_\_\_\_ Title of Story \_\_\_\_\_

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Student Name: \_\_\_\_\_ Title of Story \_\_\_\_\_

Student Name: \_\_\_\_\_ Title of Story \_\_\_\_\_

To be counted toward the classroom total, each story entered must be the work of an individual student, and must comply with all the rules for individual entries to the 2015 PBS KIDS Writers Contest as outlined in the PBS KIDS Writers Contest Individual Contest Official Rules. Unqualified stories will not be counted toward the classroom total. To be entered into the PBS KIDS Writers Contest, each individual entry must be accompanied by an individual PBS KIDS Writers Contest Individual Contest Entry Form, completed in full.



# CLASSROOM SWEEPSTAKES ENTRY FORM



I acknowledge that I have read the CLASSROOM SWEEPSTAKES rules & regulations prior to signing this and that I understand the rules.

**Required:**

Teacher Signature \_\_\_\_\_ Email address: \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

If different than the above address:

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

**Optional for Promotional Offers to Teacher named above from PBS KIDS Partners**

Yes / No (circle one) PBS KIDS Partners may contact me via email up to two times for promotional offers PBS KIDS and the PBS KIDS Writers Contest.

**Deadline for receipt of entry form address is:**

**DEADLINE: March 30, 2015 (03/30/2015)**

**PBS KIDS WC – CLASSROOM SWEEPS  
WVIA-TV  
100 WVIA Way  
Pittston, PA 18640**