

Essay Contest Application Form UNA-USA Gainesville Chapter, 2021

First Name: (Print) _	Last Name:
Age:Grade: _	
Address	
City	State
Zip	Phone
Email:	
Name of Parent or G	Guardian: (Print)
Parent Personal Ema	nil:
This essay represent	s my own work. I understand that my essay will become the property of UNA-
USA Gainesville Ch	apter to use at its discretion, that it will not be returned to me, and that the
judges' decisions are	e final.
Student's Signature:	
Parent Permission: E	By signing this application, I agree to allow UNA-USA Gainesville Chapter to
use and/or publish th	ne essay that my child has submitted to the UNA-USA Gainesville Chapter Essay
Contest, and to use r	ny child's name to identify the author of the essay. I release UNA-USA
Gainesville Chapter	from any claims that occur in connection with the use of the original essay. I
have read the forego	ing and fully understand the contents thereof.
Name of Parent or G	Guardian (Print):
Signature of Parent of	or Guardian:
School:	
Teacher:	
For essay submission	ns or for questions contact: <u>una-essay-contest@una-usagainesvillefl.org</u>

This activity is neither sponsored nor endorsed by Alachua County Public Schools.