

OFFICIAL STUDENT ENTRY FORM: Competition Topic:_______ DMAW/EF COLLEGIATE MAXI COMPETITION: Date of Submission:______

Deadline: Friday, October 29, 2010 by 5:00 p.m.

Name of team member (please print):Mr, Mrs:	_				
College					
University:					
School Address:					
	Permanent Phone:				
Team Member's Permanent Address:					
Expected Date of Graduation:Study:		r Field of			
College/University Standing (circle one):	Freshman	Sophomore	Junior	Senior	Grad Student

Note: These three items below must be fully agreed to. Each student must sign the statement below.

- 1. I have read and agree to abide by the rules and regulations of the DMAW/EF competition and understand that failure to comply will result in the disqualification of the entire team.
- 2. I agree that all entries become the shared property of the DMAW/EF and National Geographic Society and that they may be used by DMAW/EF for publicity, and they will not be returned to me. I understand that I will not be compensated now or in the future for any services rendered in connection with this competition.
- 3. I have not received outside help of any kind from professionals.

Student's signature:
Faculty Advisor's Name (Please Print):
Faculty Advisor's Signature:
Faculty Advisor's School Address:
Faculty Advisor's Office Phone:
Fax:
Faculty Advisor's Permanent Address (for notification purposes only):
Faculty Advisor's Permanent Phone: E-mail:

Include signed entry forms from each team member along with team's written submission. Mail: Collegiate Maxi Competition, DMAW/EF, 4414 Walsh St, Chevy Chase MD 20815. Questions may be sent to: Karen Depew (karen@northwoodconsulting.com), 301-652-7074.

Please complete the following information (optional):

Your Hometown and Campus Newspapers

Please complete the contact information as thoroughly as possible – we want to be ready to promote your entry if it is among the winners! Use additional sheets if necessary.

Editor (if known):
Name of Publication:
Street address:
City, State, Zip
Email:
Phone number: Fax number:
Editor (if known):
Name of Publication:
Street address:
City, State, Zip
Email:
Phone number: Fax number:
Editor (if known):
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