

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

EACH TEAM MEMBER MUST COMPLETE THIS DOCUMENT AND SUBMIT WITH ENTRY

Name of team member (pl	ease print					
College University:						
School Address:						
Cell :	Permanent Phone:	E-mail ad	dress:			
Team Member's Permanent Address:						
Expected Date of Graduat	ion:	_Major Field of Study				
College/University Standing	ng (circle one): Freshman	Sophomore Junio	r 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 Ourisman Chevrolet 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 notificationly)	• •					
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 (kdnorthwood@gmail.com), 301-652-7074.

Please complete the following information (optional):

Your Hometown and Campus NewspapersPlease 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:	
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:	