

**CUT OUT AND RETURN THIS OFFICIAL ENTRY FORM**

(must be cut out and stapled to top left corner of poem)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Entrant's Mailing Address: \_\_\_\_\_ Apt # \_\_\_\_\_  
(Do Not Use School Address)

Zip Code: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Poem Title: \_\_\_\_\_

Grade: \_\_\_\_\_ School Name: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

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Mail to:

Review Committee

c/o The America Library of Poetry

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