



**2017 TCT Kansas Day Poetry and Photo Contest Entry**

**Student Name:**

**Age:**

**Grade:**

**School:**

**Name of Parent/Guardian:**

**Address:**

**Home Phone: (TCT #)**

**Mobile Phone:**

**Email:**

Please attach a typed copy of Poem to this form and/or a copy of your photo. You will also be asked to provide a digital file of your submission if selected.

