

Treehouse Tales Contest Entry Form



(PLEASE TYPE OR PRINT LEGIBLY)

Child's Name _____ Age _____

Child's Mailing Address _____

City/State/Zip _____ Home Phone _____

Child's Grade (circle): **1** **2** **3** **4** Child's Sex: **F** **M**

Title of Story _____

Number of Pages _____ Number of Words _____ Number of Illustrations _____

Where did you learn about the contest? (circle all that apply)

WCNY-TV Radio WCNY website Newspaper School Other _____

Parent/Guardian Consent

By signing below, I affirm that the text and illustrations submitted to this contest are original, were solely created by my child, and do not infringe upon the rights of any third party. I hereby consent to permit WCNY Public Media (The Public Broadcasting Council of Central New York, Inc.), the right to use this work in any fashion and for any legal purpose without limit as well as the voice, picture, name, likeness of the minor child named above as well as any biographical information which I willingly provide. I release WCNY, its sponsors, directors, employees, and successors from any liability in connection with this contest submission. Further, I acknowledge that I have read, understand, and consent to the rules and rights associated with this contest.

Parent/Guardian Signature _____ Date _____

Print Name _____ Email address: _____

School Information *(for entries being delivered to WCNY by a teacher, please complete the following)*

Teacher Name _____ Email address _____

School Name _____

School Mailing Address _____

City/State/Zip _____ School Phone _____

Deadline for receipt of entries is March 2, 2015

Mail contest entry, accompanied by completed contest entry form to:

WCNY Public Media ♦ ATTN Treehouse Tales Contest ♦ P.O. Box 2400 Syracuse, NY 13220-2400

Or deliver to: 415 W. Fayette St., Syracuse, NY 13204