

Preliminary Health & Safety Speaking Contests (in person)

County: _____

Select one: _____ June 29 (Columbus)

_____ July 12, (Wooster)

Registration begins at 9:30 a.m.; Orientation at 10:00 a.m.



**

Senior Contestant:

Name _____ Age (as of Jan. 1) _____

Address _____ City _____ Zip _____

Title of Talk _____

Parent/Guardian Name(s) _____ Phone Number _____

Email _____

Senior Contestant:

Name _____ Age (as of Jan. 1) _____

Address _____ City _____ Zip _____

Title of Talk _____

Parent/Guardian Name(s) _____ Phone Number _____

Email _____

Junior Contestant:

Name _____ Age (as of Jan. 1) _____

Address _____ City _____ Zip _____

Title of Talk _____

Parent/Guardian Name(s) _____ Phone Number _____

Email _____

Junior Contestant:

Name _____ Age (as of Jan. 1) _____

Address _____ City _____ Zip _____

Title of Talk _____

Parent/Guardian Name(s) _____ Phone Number _____

Email _____

*** Over for Team/Skit Contestants ***

Team/Skit Contestants (unlimited teams per county – up to five team members/team maximum)

Title of Skit _____

Name _____	Age (as of Jan. 1) _____
Address _____	City _____ Zip _____
Parent/Guardian Name(s) _____	Phone Number _____
Email _____	
Name _____	Age (as of Jan. 1) _____
Address _____	City _____ Zip _____
Parent/Guardian Name(s) _____	Phone Number _____
Email _____	
Name _____	Age (as of Jan. 1) _____
Address _____	City _____ Zip _____
Parent/Guardian Name(s) _____	Phone Number _____
Email _____	
Name _____	Age (as of Jan. 1) _____
Address _____	City _____ Zip _____
Parent/Guardian Name(s) _____	Phone Number _____
Email _____	

Return NO LATER THAN: one week prior to preliminary contest..... to villard.1@osu.edu OR OSU Extension, Richland County, 1495 W. Longview Ave., Suite #206, Mansfield, Ohio 44906