

# 2024 JPL Young Writers Contest

One form per entry.

Full Name:		
Address:		
City:	State:	Zip:
Phone Number:		
Parent's Email:		
Category: Comic <input type="checkbox"/>	Poetry <input type="checkbox"/>	Short Story <input type="checkbox"/>
Grade of author (2024-2025):		
Title of Work:		

## Permission Form

By signing this form, I state that this piece is my personal work. I also understand that winning entries will be displayed in a book created by and circulated by the Johnson Public Library. I also give permission to have my photo posted on the library website and social media.

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### ***Parent/Guardian Signature:***

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Submissions are due by 5pm, Friday, August 9th, 2024**

**Mail or Deliver to:** The Children's Department, Johnson Public Library | Attn: Gavin  
274 Main St., Hackensack, NJ 07601

**Email Submission:** [jplkids@johnsonlib.org](mailto:jplkids@johnsonlib.org) | Subject: Young Writers Competition