



Script Submission Cover Page

COMPETITOR NAME: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN CELL PHONE (For During Tournament): _____

ADDRESS: _____

CLUB: _____

COMPETITION DIVISION: Check only one.

☐ VARSITY

☐ JUNIOR VARSITY

☐ JUNIOR

EVENT GENRE: Check only one. Note: Only one event per cover page.

☐ PUBLIC ADDRESS

☐ INTERPRETATION

EVENT NAME: _____

SPEECH TITLE/TOPIC: _____

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☐ DIRECT QUOTES ARE **HIGHLIGHTED**, AND DIRECT QUOTE WORD COUNT IS: _____ (≤ 200)

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STUDENT SIGNATURE & DATE: _____

PARENT/GUARDIAN AND CLUB REPRESENTATIVE AFFIRMATIONS: I certify that I have read and/or seen this speech and believe it to reflect the work of the student and to be appropriate for CCA audiences. I believe the copyright information to be correct (Interp only).

PARENT SIGNATURE & DATE: _____

CLUB REPRESENTATIVE SIGNATURE & DATE: * _____

* Club Representative is a coach or someone in club leadership other than the parent.