

Participant's Name:	Age:	Grade
Category: Please circle		
Kindergarten		
Elementary		
Jr High		
High School		
Name of School :		
Name of Parish:		
Parent/Guardian Name:		
Parent/Guardian/Teacher Signature:		
Please make copies of this Entry Form for all s	ubmissi	ions

Only prize winning original entries will be returned.

Mail your entry postmarked by November 15 th, 2023 to: Our Lady of the Angels Regional Council Poster Contest Maritza Chouza, OFS Director of Youth at Our Lady of the Angels Regional Fraternity 119 - 388 Sandarac Dr NW Calgary, AB

T3K 4E3

Phone: 778 533 1736 or email maritzachouza@gmail.com

Thank you for participating, God Bless!