

# Stages for Change



**PRINT CLEARLY**  
**One Entry Per Person Per Category**

## Entry Form

You may enter your text online then print & fax to us

Student Name \_\_\_\_\_ Grade Level \_\_\_\_\_  
Last First

Student Address \_\_\_\_\_  
Street City Zip Code

Student Email \_\_\_\_\_ Student Phone \_\_\_\_\_

Parent/Guardian \_\_\_\_\_  
Last First

Parent Email \_\_\_\_\_ Parent Phone \_\_\_\_\_

**ALL ENTRANTS *MUST* HAVE AN ADULT SPONSOR 21 OR OLDER**

Sponsor \_\_\_\_\_

Sponsor Email \_\_\_\_\_ Sponsor Phone \_\_\_\_\_

## Entry Categories

\* **Monologue/Spoken Word:** Title: \_\_\_\_\_

\* **Playwriting:** Title: \_\_\_\_\_

\* **Visual Art:** Title: \_\_\_\_\_

Medium: \_\_\_\_\_

\* **Film:** Title: \_\_\_\_\_

\* **Duet:** Title: \_\_\_\_\_

**Partner's** name: \_\_\_\_\_

\* **Ensemble** Title: \_\_\_\_\_

List **ALL** (max 8) Entrants' names in piece: (print)

_____	_____
_____	_____
_____	_____
_____	_____

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\* **One Act:** Title: \_\_\_\_\_  
List **ALL** (max 10) Entrants' names in piece: (print)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* **Dance:** Title: \_\_\_\_\_  
List **ALL** (max 6) Entrants' names in piece: (print)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing below, I agree to adhere to all rules set by MAVAW, Stages For Change.

\_\_\_\_\_  
**Participant** Printed Name                      *Participant Signature*                      Date

\_\_\_\_\_  
**Sponsor** Printed Name                      *Sponsor Signature*                      Date

**ALL ENTRIES WITH MULTIPLE ENTRANTS MUST BE TURNED IN TOGETHER**

 RETURN YOUR SIGNED ENTRY TO ONE OF THE FOLLOWING 

Fax: 354-1342 or

Mail: PO Box 4909, Jacksonville, FL 32201 (attn: Al Emerick)

Questions contact: [stagesforchange@comcast.net](mailto:stagesforchange@comcast.net)