

**TEXAS LIONS**  
**“OPPORTUNITIES FOR YOUTH”**  
**Contestant Application**

\*\*Please print or type - Check the contest for which application is made\*\*

Diabetic Awareness Essay  Drug Awareness Speech  Outstanding Youth Award

Contestants Full Name \_\_\_\_\_

Social Security Number \_\_\_\_\_ Gender (M/F) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Grade Point Average \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Name(s) Parent or Guardian \_\_\_\_\_

Home phone \_\_\_\_\_

Sponsoring Lions Club \_\_\_\_\_

School attended during contest year \_\_\_\_\_

School address \_\_\_\_\_

School Counselor name \_\_\_\_\_

Expected year of higher education enrollment \_\_\_\_\_

Name of University/College you plan to attend \_\_\_\_\_

We certify that statements in this application are correct. We have reviewed a copy of the Policies and Rules for the contest and promise to comply with them. We consent that all materials, creations, concepts, likeness, designs, posters, ideas, and intellectual rights and property used, mentioned, spoken, and written for or in connection with this contest, is the property of Texas Lions MD-2 and may be published and used for any purpose selected by the Texas Lions MD-2 Council of Governors. We understand that contestants are to be available, on request to participate in MD-2 events and activities for the period of one year after the contest

Signed by Contestant \_\_\_\_\_ Parent or Guardian \_\_\_\_\_

District must submit; an **Entry Fee** check of **\$200.00** made payable to MD-2 State Convention attached to the **Application, Personal Biographical Information, Three Letters of Recommendations, Three Copies of Diabetic Essay** (if applicable), and **Two wallet-sized, color Photographs** (head and shoulders close-up) to the respective State Contest Coordinator. **Must be received by May 1, 2008**

District Governor \_\_\_\_\_ District \_\_\_\_\_