

# DISTRICT STAR EVENT ENTRY FORM

USE 1 FORM PER CONTEST

District: \_\_\_\_\_

Event Entered: \_\_\_\_\_ Level Entered: Level 1 Level 2 Level 3

Presentation Title: \_\_\_\_\_

Chapter: \_\_\_\_\_

Advisor's Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

School Phone Number: \_\_\_\_\_

School Fax Number: \_\_\_\_\_

Circle Entry: Individual or Team Total number of participants on team: \_\_\_\_\_

Print Participants' Name(s) and Grade Level(s): (additional sheets may be attached)

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Type of visual used (if applicable): \_\_\_\_\_

Circle items that need to be provided according to the STAR Events Manual:

table

other items are the responsibility of the contestant

The following signatures certify that no part of this event has been previously used by our chapter for district or state level competitive events.

\_\_\_\_\_  
Chapter Advisor

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

**PLEASE ATTACH ONE COPY OF YOUR AFFILIATED MEMBERSHIP FORM WITH THE NAMES OF PARTICIPANTS HIGHLIGHTED.**