



2017 International Torrance Legacy Creative Writing Awards

Parental Consent Form

My signature below indicates that I grant permission for my child to participate in the 2017 Torrance Legacy Creative Writing Awards, that I have read these Terms and Conditions, and I and/or my child agree to abide by them. My signature below also indicates that I grant CO-SPONSORS the right to use my/my child's submission, royalty free (without compensation), for posting and publication. I certify that the submission attached hereto is an original composition and is not subject to any copyright restrictions or violations.

Author's Name: _____
(First) (Middle) (Last)

Author's Signature: _____
(If 18 years old or above) (Date)

Parent/Guardian Name: _____

Parent/Guardian Signature: _____
(Date)

Please send your complete submission, application, and consent forms to the following address:

Torrance Legacy Creative Writing Awards
C/O The Center for Gifted
1926 Waukegan Rd. Suite 2
Glenview, IL 60025

or email your complete submission, Application, and Parental Consent forms to:

torrancewriting@centerforgifted.org

Subject: Torrance Legacy Creative Writing Awards

Submissions must be postmarked no later than August 20, 2017