Registration Form

Young Writers Workshop June 24-28, 2019

Last name	First name	-
Home address		-
Home phone		-
Name of current school	Current grade	-
Name of parent or guardian**		-
Parent or guardian e-mail		-
Work phone number of parent or guard	dian	-
Name and email of reference (should be	pe teacher, principal, or another	adult who is not a family member)
Assistance for participants with disabili	ties/dietary requirements:	
Please indicate any special requirement	nts and assistance needed (use	additional paper as needed):
**In cases of joint custody, please list the workshop.	he parent/guardian who the chil	d will reside with at the time of the
Send completed application (registration	on form and applicant's 150-wor	rd statement of interest) to:
Young Writers' Workshop Attention: Katy Karlin Kansas State University Department of English 108 ECS Manhattan, KS 66506		
or via email to klkarlin@ksu.edu		

Application deadline for priority consideration: May 15, 2019

2/2019