

UMWP Young Writers Workshop Registration Form

Name: _____

School: _____ Entering grade: _____

E-mail: _____

Teacher's Name: _____

Teacher's Email: _____

Parent/Guardian: _____

Address: _____

City/State/Zip: _____

Phone: _____

E-mail: _____

Food allergies: _____

PARENT/STUDENT CONSENT

Do you give permission for your child to be Photographed / videotaped for instruction / publicity? Yes No

Student Signature Date

Parent/Guardian Signature Date

Make checks or purchase orders payable to The University of Mississippi. Send registrations to The University of Mississippi Writing Project, The Division of Outreach, P.O. Box 1848, University, MS 38677 or fax to 662.915.5138. Information for all workshops will be communicated via email. Registration is on a first-come, first-served basis.