



**Rotary International  
District 7730  
Rotary Against Drugs (RAD) High School Speech Contest**



**Lend a Hand**

**APPLICATION**

*Sponsored by The Rotary Club of*

**Student Information**

|                                                  |            |                         |          |       |
|--------------------------------------------------|------------|-------------------------|----------|-------|
| Name Of Student                                  |            |                         | Grade    |       |
| Student's Mailing Address Street/Post Office Box |            |                         | City     | State |
|                                                  |            |                         | Zip Code |       |
| Student's Phone Number                           | Fax Number | Student's Email Address |          |       |

**School Information**

|                                                              |            |                                 |       |          |
|--------------------------------------------------------------|------------|---------------------------------|-------|----------|
| Name Of School                                               |            | Principal's Name                |       |          |
| School's Mailing Address Street/Post Office Box              |            | City                            | State | Zip Code |
|                                                              |            |                                 |       |          |
| School's Phone Number                                        | Fax Number | Principal's Email Address       |       |          |
| Name of Counselor/Teacher For RAD High School Speech Contest |            | Counselor/Teacher Email Address |       |          |

**Parent/Guardian Information**

|                                                          |            |                               |       |          |
|----------------------------------------------------------|------------|-------------------------------|-------|----------|
| Name Of Parent/Guardian                                  |            |                               |       |          |
| Parent/Guardian's Mailing Address Street/Post Office Box |            | City                          | State | Zip Code |
|                                                          |            |                               |       |          |
| Parent/Guardian's Phone Number                           | Fax Number | Parent/Guardian Email Address |       |          |

**PARENT OR GUARDIAN PLEASE READ AND SIGN**

I/we understand that our daughter/son will be participating in Rotary sponsored Drug and Alcohol Abuse Prevention Speech Contests. They will initially present their speech locally in a Rotary Area with potential progression to the District 7730 Contest, to be held at James Sprunt Community College, Kenansville, NC and the Rotary Multi-District Contest that will be held in Chapel Hill, NC. Members of Rotary will judge all speeches. That their speech may be video taped and voice recorded for the purpose of public viewing/listening.

I/we give permission for our daughter/son to participate as described above.

Date:

Parent/Guardian Signature

**Participants' family, friends and teachers are invited to attend all contests!**

*This is an interactive pdf form. Please fill out completely online then print, secure required signature and submit to your Counselor/Teacher for Rotary Against Drugs High School Speech Contest. Thanks*