



Chipping Norton Writers

Competition entry form

ITEMS MARKED WITH AN ASTERIX (*) MUST BE FILLED IN OTHERWISE THE ENTRY WILL BE NULL & VOID AND NO REFUND OFFERED

1 - PERSONAL DETAILS

FULL NAME *

PEN NAME (IF APPLICABLE)

ADDRESS *

POSTCODE *

EMAIL ADDRESS *

TELEPHONE *

2 - ENTRY DETAILS

STORY TITLE *

COMPETITION *

WORDCOUNT * CLOSING DATE *

3 - PAYMENT DETAILS

PAYPAL ACCOUNT *

PAYPAL REFERENCE *

CHEQUE NUMBER *

4 - DECLARATION

IF ACKNOWLEDGEMENT REQUIRED PLEASE POST WITH SAE

SIGNED * DATE *

CHIPPING NORTON WRITERS USE ONLY

DATE RECEIVED	<input type="text"/>	CHECKED	<input type="text"/>
ENTRY ACCEPTED	Y <input type="checkbox"/> N <input type="checkbox"/>	LET ENTRANT KNOW	<input type="checkbox"/>
SAE REQUESTED	Y <input type="checkbox"/> N <input type="checkbox"/>	SENT BACK	<input type="text"/>