

Right to Life of Indianapolis, Inc.

ORATORY CONTEST

2010 CONTEST APPLICATION FORM

(Please type or print)

STUDENT'S NAME: _____

ADDRESS: _____

TELEPHONE: () _____ AGE: _____ GRADE _____

E-MAIL _____

SCHOOL: _____

ADDRESS: _____

TEACHER OR SPONSOR: _____

TELEPHONE: () _____ E-MAIL _____

Must be received by April 1, 2010

RETURN TO: Bob & Mary Rose Collins, Area Coordinators
Right to Life of Indianapolis, Inc.
1060 East 86th Street, Suite 61B
Indianapolis, IN 46240

317-582-1526
317-819-5045 fax