



Youth Advisory Commission
Virtual Poetry Slam Entry Form
Registration Deadline: April 12, 2021



Turn in entry form to:

yvalderrama-santana@killeentexas.gov or Family Recreation Center, 1700 E. Stan Schlueter Loop

For more information call (254) 501-8873 or visit www.killeentexas.gov/Rec

Killeen Youth Advisory Commission invites you to participate in our 1st Virtual Poetry Slam. The theme is **YOUTH SPEAKS**. We encourage you to use this platform to express yourself and let your talent shine.

Student information:

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip code: _____

Phone Number: _____ E-mail: _____

Grade: _____ School: _____

Parent/Legal Guardian information:

First Name: _____ Last Name: _____

Phone Number: _____ E-mail: _____

Entry Rules and Guidelines:

- Participants must submit a pre-recorded video no longer than 2 minutes to: yvalderrama-santana@killeentexas.gov
- Participants must be between 6th to 12th grade
- Each participant must perform an original piece they've written
- Profanity and derogatory remarks are not allowed

Guidelines for the Videos:

- Avoid unnecessary zooms and pans
- Video must be shot in portrait mode
- Clean background free of distractions
- In the video state your: Full name, grade, school, and the title of your piece

After Submitting Your Entry:

- Participants will be notified by April 13, 2021, via e-mail if their entry was selected
- Selected participants will be scheduled a time to record their piece on Friday, April 16, 2021 at the Lions Club Park Senior Center, 1700 Stan Schlueter Loop. Participants must be on time for their recording. There will be no make-up day.
- Virtual Poetry Slam will air on **April 24, 2021**, via City of Killeen's social media (Facebook, YouTube, IG)

Entry Information:

Title of Entry: _____

Description of the entry piece: _____

Photo/Video Release

I, _____, agree with the Virtual Poetry Slam rules and guidelines.

I, _____, the parent/legal guardian of _____ grant the City of Killeen Youth Advisory Commission permission to reprint my photograph and/or my son or daughters' photograph and to use video of my son or daughter for Youth Advisory Commission publications, Web sites, electronic and digital media, publicity, advertising and/or the calendar. All photographs/videos will remain the property of the City of Killeen Youth Advisory Commission. I also grant the Youth Advisory Commission to identify my son or daughter with their full name in the aforementioned communications.

Signature of participant: _____ Date: _____

Signature of parent/legal guardian: _____ Date: _____

-----*Office Use*-----

Received by: _____ Date: _____ Entry Number: _____

Entry Status: Approved Rejected: _____

Action by: _____ Date: _____