** TASTE OF LANGUAGES COMPETITION 2020**

**STUDENT DECLARATION**

I declare that all parts of this competition submission (i.e. video clip and written piece) are my own original work (assisted by parents in the case of students in pre-school to Year 2) and have not been copied.

I confirm that any individual featured close-up in the video (so they are clearly recognisable) have given their permission to be so featured.

I understand that if I am a prize winner or a shortlisted finalist, the ACT Bilingual Education Alliance (ACTBEA) may seek written permission (from my parent/guardian if I am under 18 years old) to display my video and/or written entry on the ACTBEA website, Facebook page and/or at a future ACTBEA-organised event.

I understand that there is no obligation to allow my entry to be published or displayed publicly, and that I (or my parent/guardian, if applicable) am/are free to decline to provide permission.

My name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My age at last birthday \_\_\_\_\_\_\_\_\_

Name of my School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details (only if you are 18 years old or over)

Phone number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following section **must be completed** if you are under 18 years of age

**PARENT/GUARDIAN PERMISSION**

I have discussed the above points with my child.

I have viewed my child’s work to be submitted in the Taste of Languages Competition 2020.

I declare that the above child is eligible for the following category (**please tick only one**):

□ Preschool – Year 2

□ Primary (Years 3-6)

□ Middle School (Years 7-9)

□ Senior High/College (Year 10- 12)

I understand that my child’s entry will not be published or displayed publicly in any way without my express written permission.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: ­­­­­­­­­­­­­­­­­\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

*If you have any queries about this form or the competition in general, please contact ACTBEA (ACT Bilingual Education Alliance) at* *canberrabilingual@gmail.com*