

ROTARY DISTRICT 7360 4-WAY TEST SPEECH CONTEST 2025



Club Entry Form

Rotary Club:		
Contest Chair:	Phone#:	
Address:		
Email Address (required):		
Contest must be completed by February 28, 2	2025	
Information on Club Contest: Date:	Time:	
Location:		
Address:		
□ Check if entry Fee of \$225 is enclosed. P	Please make check payable to: Rotary District 73	60
This entry fee covers the cost of the Regional	al and District Contests and District cash awards	
Please note: Student will not be all	llowed at Regional contest without payment	
Participant poster and other forms can be do	ownloaded and copied at www.rotary7360.org/	
D	DEADLINE:	

February 28, 2025 - please submit earlier, if possible

Send Form and Entry Fee to: Art Leach, District Chair, 113 Meadowhawk Lane State College, PA 16801 ArtLeach77@gmail.com

Note: Information on form can be submitted by email
Please include all information on this form

Transportation, meals, lodging and other incidental costs incurred to participate in the district contest is the responsibility of the club or participant. The regional contestant and (1) family member will be given a meal ticket for lunch the day of the contest. Other family members and visiting Rotarians must pay the standard lunch price if they wish to attend the lunch and awards.