**Dante Poster Competition 2020**

**Open Competition School Entry Form**

SCHOOL (NAME IN FULL):

ADDRESS:

POSTCODE:

TEACHER 1:

NAME:

EMAIL ADDRESS:

PHONE (SCHOOL HOURS): MOB:

TEACHER 2:

NAME:

EMAIL ADDRESS:

PHONE (SCHOOL HOURS): MOB:

NAME OF PRINCIPAL:

The completed **School Entry Form**, **Remittance Form** and **Student Entry Lists** must be sent to the competition coordinator at [postercomp.dante.melbourne@gmail.com](mailto:postercomp.dante.melbourne@gmail.com)

**Dante Poster Competition 2020**

**Teacher’s Choice Entry Form**

SCHOOL:

NOMINATED STUDENT:

STUDENT’S YEAR LEVEL:

IS THE STUDENT BEING ENTERED IN THE OPEN COMPETITION (please indicate)? YES NO

Please provide a brief statement outlining reasons for nomination (2-3 sentences). This will be read at the presentation ceremony:

**Dante Poster Competition 2020**

**Remittance Form**

Enclosed is the school’s cheque or details of Electronic Funds Transfer for entrance fees to the Dante Alighieri Society’s 2020 **Poster Competition** on behalf of the students of:

NAME OF SCHOOL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSTCODE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF TEACHER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TEACHER’S EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please fill in the following table:**

|  |  |
| --- | --- |
| **Entrants per Year level** (all sections) | **Total** |
| Foundation |  |
| Grade 1 |  |
| Grade 2 |  |
| Grade 3 |  |
| Grade 4 |  |
| Grade 5 |  |
| Grade 6 |  |
| Teacher’s Choice (one student only) |  |
| Total number of students entered |  |
| Cost: @ **$5.00/student** |  |
| **TOTAL** **AMOUNT** | $ |

NOT SUBJECT TO GST

Please indicate how your school has made payment

Cheque EFT

Please make all cheques payable to “Dante Alighieri Society” and crossed “Not Negotiable”.

**EFT**

**Account Name**: Dante Alighieri Society Melbourne Inc.

**Bank:** Bendigo Bank (Cassa Commerciale) **Branch:** Melbourne

**BSB:** 633-000 **Account Number:** 151312089

**Electronic Funds Transfer Details:**

School Account No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of EFT: \_\_\_\_\_\_\_\_\_\_\_

A copy of this form must be sent to [postercomp.dante.melbourne@gmail.com](mailto:postercomp.dante.melbourne@gmail.com)

Thank you ☺

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Student First Name | Student Surname | Year Level | Result  (Office Use Only) |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
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| --- | --- | --- | --- | --- |
| No. | Student First Name | Student Surname | Year Level | Result  (Office Use Only) |
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| No. | Student First Name | Student Surname | Year Level | Result  (Office Use Only) |
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