

Wombat Books Challenge Entry Form

One form per illustration is required. Please select this AND your illustration when using our online form.

First Name: Surname:			
Age:	School:		State:
Phone numbe	r:		
Email address	::		
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Included illust publication of	•	en a letter of agi	reement to sign prior to the
Parental Period I authoris Wombat Book	mission ee cs Illustration Cha	llenge 2017.	(child's name) to enter the is form is accurate
Parent's Name	e:		Phone:
Parent's Signa	ture:		

Return completed forms with illustration entries to:

Illustration Challenge 2017 Wombat Books PO Box 1519

Capalaba QLD 4157

E: competitions@wombatbooks.com.au