

Minnesota Citizens Concerned for Life
ORATORY CONTEST

Application Form

Student Name: _____

Parent Name: _____

Grade: 11th / 12th

Address: _____

Student Email: _____

Parent Email: _____

Parent Phone:_(_____)_____

By signing this form students agree to follow all Oratory Contest rules and affirm that their submission is their own work.

Student Signature _____

By signing this form parents agree to their student's participation in the MCCL Oratory Contest.

Parent Signature _____

Send this application form, photo release form, and video submission to mccl@mccl.org, subject line "2025 Oratory Contest Submission".