CLASS/SCHOOL ENTRY FORM

How to Enter



Answer the following questions in 300 words or less.

- 1. Why did you decide to volunteer?
- 2. What did you do to help others?
- 3. Was this your first time volunteering?
- 4. How would you describe your volunteer experience?
- 5. Would you volunteer again?



Fill out this entry form.

Category (check one): () CLASS () SCHOOL

School Street Address:

Student Name:

Age on February 1, 2005:_____

Grade Level:

Teacher Name:_____

School Name:_____

Citv: State: Zip Code:_____

School Phone:

Teacher/School Principal's Signature:

Number of Students Who Participated in Project:_____





Mail your story to:

Disney Adventures All-Star Contest c/o The Points of Light Foundation 1400 I Street NW, Suite 800 Washington, D.C. 20005 All entries must be received by: February 1, 2005