

## Doodle title - 10 words max

Doodle description - 50 words max

Parent/Guardian Name:

Address:

City, State, Zip Code:

Email:

Phone:

## Student Name:

Student Grade: School or Non-Profit Organization: School or Non-Profit Organization address:

School or Non-Profit Organization Phone:

By signing below, I acknowledge that I am a parent/legal guardian of the Entrant and give my permission for them to enter the Contest. I understand the organization which I enter on the contest form is the organization that will receive the technology award. If deemed a national winner this organization will be subject to Google's Giving Policy. I have read and accept the Official Doodle 4 Google Contest rules located at doodles.google.com/d4g/rules.html and acknowledge that Google's Privacy Policy located at google.com/privacy applies. I confirm that the Entrant is eligible according to the contest rules.

Parent / Guardian Signature:



Do not cover For office use only