

History Day Registration Forms

COVER SHEET:

MISSISSIPPI HISTORY DAY COMPETITION 2004

FEE: **\$10.00** for each STUDENT CONTESTANT and STUDENT SPECTATOR.
THERE IS NO FEE FOR TEACHERS OR CHAPERONES.

* Please **print or type** this sheet; illegible entries cannot be considered.

* Please make additional copies of this sheet **FOR EACH ENTRY**.

Student's name: _____

Student's home address _____

Name of parents/guardians _____

Student's telephone number _____

Name of school _____

Title of entry _____

Check one: Junior High _____ Senior High _____ Middle School _____

Category:

(Check **ONLY one**; refer to the Contest Guide for official categories.)

_____ Paper _____ Individual Exhibit _____ Group Exhibit

_____ Individual Performance _____ Group Performance _____ Quiz Bowl

_____ Individual Documentary (Media) _____ Group Documentary (Media)

Name of your history club or Junior Historical Society _____

Sponsor's
name _____

Sponsor's address and phone
number _____

I hereby submit that my entry is my own work and that I have been informed that it must follow the guidelines set forth by both National and Mississippi History Day regulations.

Student's
signature _____

Date _____

**DIRECTIONS FOR COMPLETING YOUR
HISTORY DAY REGISTRATION:**

PAPERS:

ATTACH THIS COMPLETED COVER SHEET TO YOUR
ESSAY AND MAIL ALONG WITH TWO COPIES OF YOUR
WORK TO THE
ADDRESS BELOW BY **MARCH 1 st.**

IF YOUR PAPER IS POSTMARKED BY **MARCH 1 st**, IT IS
ON TIME. PAPERS WILL NOT BE RETURNED; KEEP A
COPY FOR YOURSELF.

ALL OTHER CATEGORIES OF COMPETITION:

COMPLETE THE COVER SHEET AND MAIL BY **March 1
st, 2004.**

(THE COVER SHEETS ENABLE US TO FIND OUT HOW
MANY
STUDENTS PLAN TO COMPETE. IF WE RECEIVE A
LARGE NUMBER, WE WILL NEED TIME TO FIND
ADDITIONAL JUDGES AS WELL AS ADDITIONAL
ROOMS.)

THANKS FOR YOUR HELP!

MAIL ALL MATERIALS TO:
HISTORY DAY IN MISSISSIPPI
UNIVERSITY OF SOUTHERN MISSISSIPPI
BOX 5047
HATTIESBURG, MS 39406-5047
FAX: 266-4334

Please call if you have any questions or if you have any last-
minute changes to entry titles or contestants.!

Mary Beth Farrell:
Office 601-266-4335 (Please leave a voice mail message.)
Home 601-544-5311
email: mary.farrell@usm.edu

REGISTRATION FORM:

HISTORY DAY IN MISSISSIPPI 2003

**Please return this form no
later than March 1 st, 2004 to:**

History Day in Mississippi,
University of Southern Mississippi,
Box 5047, Hattiesburg, MS 39406.
Or fax it to Mary Beth Farrell at 601-266-4334.

**YES, OUR SCHOOL WILL ATTEND HISTORY DAY AT THE
UNIVERSITY OF SOUTHERN MISSISSIPPI
tentatively scheduled for Spring 2004!**

Teacher's name _____

Home phone _____ School phone _____

Email _____ Fax _____

Number planning to attend (please include chaperons.) _____

We will be eating in the University Commons. _____

We will be eating off-campus. _____

My group includes students with special needs. _____
(If so, please let us know what we can do to help.)

IMPORTANT:

On the back of this page, please type or print the names and Social Security Numbers of all students who plan to attend as either spectators or competitors.

We will need this list by **March 1 st** for insurance purposes.
Attach an extra sheet if needed.
Please call if you have any last-minute additions.