



GOLDEN DOZEN

Entries must be postmarked by November 15.

Name of Yearbook _____

Yearbook Theme _____

School _____

School Street Address _____

School City/State/Zip _____

School Phone _____

Enrollment _____

Adviser _____

Editor(s) _____

Email (We will email when book is received.) _____

Is the cover of the book an original design? yes no

Are the endsheets an original design? yes no

Comments for Judge: _____

Send this form with your book to :
Gina Shook, Carlyle High School
1416 12th St., Carlyle, IL 62231
Questions? Email shook.gina@gmail.com