

tell your own story
artsbeyou



2026 PARENTAL AUTHORIZATION FORM

**This form is mandatory for any contestant
or the manuscript will not be eligible for judging**

Contestant's name: _____ Date of Birth: ____/____/____
(first) (middle) (last)

Current grade level: _____ Current school: _____
(2025-2026 Academic Year) (2025-2026 Academic Year)

HOME address: _____
(city) (state) (zip code)

- I/My child as listed above has our consent to submit an entry to the contest as stated.
- I/We are aware that his/her manuscript may be published plus name and photograph displayed to the public eye.
- I/We understand that he/she may participate in any media or promotional events related to the contest.
- I/We acknowledge to have read and understand the contest rules, and that the entrant will be bound by these rules.
- I/We release all claims against the co-founders (arts be you, MCA academy and the former Miami Conservatory of Music) with respect to copyright ownership and publication including any claim for compensation related to the use of the materials.

If the contestant is under the age of 18

1. **Mother's/Guardian's** email: _____ Phone: _____

Mother's/Guardian's signature _____ Date: _____

2. **Father's/Guardian's** email: _____ Phone: _____

Father's/Guardian's signature _____ Date: _____

If the contestant is 18 of age or older

Contestant's email: _____ Phone: _____

Contestant's signature _____ Date: _____

Email this form along with:

- The online Registration Form
- The one-time \$10 Entry Fee (online payment) unless it is waived

Email: mystory@laplumecontest.com
Registration and Payment: <https://laplumecontest.com/sign-up/>
Information: www.laplumecontest.com

Manuscript Submission Deadline: August 13, 2026 (First Day of Miami-Dade County Public Schools)