**Competition Entry Form**

**Please complete one form for each entry.**(If you are under 18 years old this must be completed by a parent, carer, teacher or other responsible adult.)  
  
Once completed please email this form with your entry to: [pentoprint@lbbd.gov.uk](mailto:pentoprint@lbbd.gov.uk)

**Full Name:**

**Pen Name** (optional):

**Contact Number:**

**Contact Email:**    
  
**Address:**

**Post Code:**

**I have entered** (Name of competition)**:**

**The title of my entry is:**

**Genre** (If applicable):

I confirm I have read and agree to the Terms & Conditions applicable to this competition. (please click the box):

Please read the Pen to Print Terms and Conditions of Submission: <https://pentoprint.org/tandcs/>  
I confirm I have read and agree to the Pen to Print Terms & Conditions of Submission   
(please click the box):   
 **Name of signatory**:   
(If signing for an under 18 year old: Parent  / Carer  / Teacher  / Other  (Please click whichever applies.)   
If ‘Other’ please tell us in which capacity are you signing:

**Signature:**

**Date:**    
(For the purposes of meeting current GDPR legislation please note, you may be required to complete further media permission forms. We may also ask to complete diversity monitoring forms.)

**Equality & Diversity**

**What is your age?** Under 16 **/** 16-19 / 20-24 / 25-29 / 30-34 / 35-39 / 40-44 / 45-49 / 50-54 /  
55-59 / 60-64 / 65-69 / 70-74 / 75+ / Prefer not to say (delete as applicable)

**What best describes your current or most recent occupation?** For e.g. unemployed, employed, part-time employed, self-employed, apprentice, full-time student, retired, prefer not to say:………………………………………………………………………………………

**How did you hear about this competition?** ………………………………...

**Which social media do you use to follow Pen to Print?** …………………

(Please only complete the section below if you are over the age of 16)

**What is your sex?** Female / Male / Intersex / Prefer not to say (delete as applicable)

**Is your gender identity the same as the sex you were assigned at birth?**

Yes / No / Prefer not to say (delete as applicable)

**How would you describe your gender identity?**

Man / Non-Binary / Woman / Prefer not to say (delete as applicable)

Prefer to self-describe: …………………………………………………………..

**How would you describe your sexual orientation?**

Bisexual / Gay Man / Gay Woman or Lesbian / Heterosexual / Queer / Prefer not to say(delete as applicable)

Prefer to self-describe: …………………………………………………………..

**With which ethnicity do you identify?** ………………………………………

**Do you identify as a D/deaf and/or D/disabled person, or have a long-term health condition?** Yes / No / Prefer not to say (delete as applicable)

**Do you identify as neurodivergent? Being Neurodivergent could include Dyslexia, ADHD etc.** Yes / No / Prefer not to say (delete as applicable)