

2009 EXHIBIT APPLICATION

NAME _____

Check appropriate category of competition:

R.T. _____ or Student _____

SS # or LSRT Member # _____

ADDRESS _____

Program (when applicable) _____

TITLE OF Exhibit _____

For group exhibits submit one application with all names and SS #'s or LSRT Member #'s

Names / SS # or LSRT Member #

_____/_____
_____/_____
_____/_____
_____/_____

I have read and agree to comply with the rules and guidelines for the Exhibit competition.

SIGNATURE _____

RETURN APPLICATION TO THE LSRT FIRST VICE PRESIDENT:

*Sandra Franklin, BSRT, R.T.
PO Box 1723
Alexandria, LA 71309*

EXHIBIT APPLICATION MUST BE USPS POSTMARKED NO LATER THAN June 15, 2009

Make award payable to: (only one name acceptable)

Check if Electricity will be needed for exhibit: Yes _____