

# South Carolina Baptist Congress of Christian Education

## PERSONAL DATA INFORMATION

Note: This is used as your On-line Registration

**Indicate the State Contest in which you are entering:**

\_\_\_\_\_ C. O. Jackson ORATORICAL

\_\_\_\_\_ N. J. Brockman ORATORICAL

Directions: **If using manually, please type or print clearly the entire Personal Data Sheet**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip

Age: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Contestant's Email Address: \_\_\_\_\_

Classification (College) \_\_\_\_\_ Grade Level (Middle/High School): \_\_\_\_\_

Name of College/School: \_\_\_\_\_

Parent(s)/Guardian(s): \_\_\_\_\_

Parent(s)/Guardian(s) Email Address: \_\_\_\_\_

Parent(s)/Guardian(s) Phone Number: ( ): \_\_\_\_\_

Youth/Oratorical Advisor: \_\_\_\_\_

Advisor's Phone Number: ( ) \_\_\_\_\_

Advisor's Email Address: \_\_\_\_\_

Name of Local Church: \_\_\_\_\_

Address of Local Church: \_\_\_\_\_

Pastor of Local Church: \_\_\_\_\_

Name of Local Association/Congress: \_\_\_\_\_

Local Association/Congress President: \_\_\_\_\_

**Submit electronically ONE copy of typed speech**

**Application Deadline: Two weeks prior to Contest Date**