

**CONTESTANT ENTRY FORM**  
**FOR THE**  
**JOSEPH S. RUMBAUGH HISTORICAL ORATION CONTEST**

*THE FOLLOWING REQUIRES THE SIGNATURES OF BOTH THE CONTESTANT AND COACH. PLEASE READ CAREFULLY.*

In entering this contest we understand the oration must be an original composition, of not less than five minutes, or more than six minutes. We are aware that this oration, in the chapter, state and national contest, must be given from memory and without the use of notes or any kind of props. We understand that in composing this oration the subject shall deal with an event, a personality, or a document, pertaining to the Revolutionary War, showing the relationship it bears to America today. It is understood that we can create the title of the oration.

We agree that the interpretation of rules and decisions of the NSSAR and its judges shall govern without reservation. Judges' notes and collective contestant ranking are the property of the SAR and will not be provided to the contestants, but will be destroyed immediately after the contest.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Contestant's Signature)

\_\_\_\_\_  
(Signature of Contestant's Coach)

NOTE: If this contestant becomes the State entrant for national competition, the state chairman is responsible for forwarding this entry form with the other documents to the national chairman.

(over)

**Form B (page 1 of 2)**

**Form B (page 1 of 2)**  
**(State or National)**

**BIOGRAPHICAL SKETCH**

Please complete the following biographical sketch. If necessary you may attach an additional sheet for extended comments. This biographical sketch and entry blank should be accompanied by a (1) recent photo with your name on the back and (2) a copy of your oration.

NAME \_\_\_\_\_  
(Last) (First) (Middle)

YOUR NICKNAME OR THE NAME YOU GO BY \_\_\_\_\_

ADDRESS \_\_\_\_\_  
(Street) (City) (State) (ZIP)

DATE OF BIRTH \_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_) \_\_\_\_\_ CLASS 9, 10, 11, OR 12  
(Circle Grade)

SCHOOL \_\_\_\_\_ ADDRESS: \_\_\_\_\_

SCHOOL ACTIVITIES \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMUNITY ACTIVITIES \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YOUR FUTURE PLANS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please email or mail a copy of the following items to the SAR Chapter Oration contest chairman:**

- Contestant Entry Form
- Biographical Sketch
- Copy of the Contestant's Oration
- Photograph (a snapshot will work)
- Youth Contest Release form

**If there is no local Chapter, send entry to the State Society Chairman. The appropriate chairman will notify the applicant of dates of the Chapter and State-level contests.**