

In order to enter you into the competition we need the following details:

Name	<input type="text"/>
Age	<input type="text"/>
City	<input type="text"/>
Country	<input type="text"/>
Home Address	<input type="text"/>
Home Telephone number	<input type="text"/>
Email address (if you have one)	<input type="text"/>

We require your parent/guardian's permission for you to take part in the competition if you are under 16.

Please ask your parent or guardian to fill in this section of the form.

I, () - Parent/gaurdian , confirm that I am 18 or over.
I have read, understood and agreed the Terms & Conditions of the Shoot Nations competition found at shootnations.org.

Home address

Home tel

Date of Birth

I consent to () - Participant, taking part in Shoot Nations.

I have read, understood and agreed the Terms & Conditions of the Shoot Nations competition found at shootnations.org.

I agree to be contacted by Plan in the future.

I agree to be contacted by Shoot Experience in the future.

Keep me updated about Shoot Nations.

Submit drawings by post to Plan UK, 5-7 Cranwood Street, London, EC1V 9LH
PLEASE MARK ALL ENTRIES: FOR ATTENTION OF UKNO, titled SHOOT NATIONS.