



NextGen ENTREPRENEURS

Name/s

(first and last of all team members)

Age(s)

Name of School

Name of Teacher

What year of school are you in?

Parent or Guardian's E-mail Address and Phone Number

Parent or Guardian's Signature

I (as parent/guardian) have read and agree to the terms and conditions, consent to the entrant entering and have obtained the teacher's consent. I understand that I and the entrant will be required to participate in promotional and media activities if the entrant is selected as a finalist/winner, and that the entry may be used for promotional, marketing or publicity purposes in any media.

More details available via the Pollinators website: www.pollinators.org.au/nextgen-entrepreneur

