



Presented by The Spitfire Poetry Group

**5th Annual Savannah Spoken Word Festival
Youth SLAM Registration Form**

Name _____ AGE _____

School _____ Grade _____

Email _____

E M H Circle one

Address _____

Contact Number(s) _____

Parent(s) or Guardian(s) _____

Registration Fee Paid _____ Received by _____

Contact-912-704-3586 for more info