| **2026 Ralph D. Vines, II Public Speaking Contest Application** |
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| Applicant Information |
| Name: |
| Date of Birth: | Age:  | Grade: | Phone: |
| Current Address: |
| City: | State: | ZIP Code: |
| Email:  |
| Name of Parent/Guardian:  |
| Academic information |
| Name of School: |
| School Address: |
| City: | State: | ZIP Code: |
| Teacher/Counselor Name: |
| SPEECH INFORMATION |
| Title of Speech:  |
| Key Points: |
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|  |
|  |
| \*Signature of Applicant: | Date: |
| I, the parent/legal guardian of above listed applicant, authorize applicant to participate in the Ralph D. Vines, II Public Speaking Contest and verify the information provided on this form is accurate. I grant Ralph D. Vines, II Endowment my permission use photographs from the Public Speaking Contest for any legal use, including but not limited to website content. Furthermore, I understand that no royalty, fee or other compensation shall become payable to me by reason of such use. |
| \*Signature of Parent: | Date: |
| I, teacher/counselor of above listed applicant, authorize applicant to participate in the Ralph D. Vines, II Public Speaking Contest and verify the information provided on this form is accurate. |
| \*Signature of Counselor/Principal:  | Date: |

\*Denotes Mandatory Signature

**Please scan and submit applications to submissions@ralphvinesendowment.com**

**Or mail to: Ralph Vines, II. Public Speaking Competition**

 **P.O. Box 3705, Little Rock, AR 72203**

 **Deadline: 4:30 PM on Friday, March 6, 2026**