



Colouring Competition Entry Form

Child's First Name:

Child's Age:

Parent/Guardian Name:

Contact Email:

Contact Phone (optional):

Would you like your child's first name and age shown on our website and social media?

YES

NO

Parent/Guardian Signature:

Date:

By signing, you agree to the terms and conditions of the competition, including consent for artwork to be shared online (unless opted out above). For more info, visit: littlesparklecleaningservices.au