



LIONS CLUBS OF TEXAS MD-2 OPPORTUNITIES FOR YOUTH



Contest Application and District Responsibility Check List

This page is to be completed by the contestant, signed by the contestant, contestant's parent or guardian, and the District Governor. Please mark the box with an 'X' to indicate the contest for which this application is being submitted. No handwritten applications will be accepted.

☐ Diabetes Awareness Essay ☐ Drug Awareness Speech ☐ Outstanding Youth

Contestant's Full Name: _____

Mailing Address: _____ City: _____ State: ____ Zip: _____

Email: _____ Phone: _____

Birth Date: _____ Gender: ☐ Male ☐ Female

Parent/Guardian: _____

Email: _____ Phone: _____

Name of School: _____ City: _____

Grade: ☐ Junior ☐ Senior Expected Year of Higher Education Enrollment: _____

University/College/Vocational School You Plan to Attend: _____

Major: _____ Minor: _____

Sponsoring Lions Club: _____ District: _____

Lions Club Contact Person: _____ Phone: _____

Email: _____

District Contest Coordinator: _____ Phone: _____

Email: _____

We certify the statements in this application are correct. We have reviewed a copy of the Policies and Rules for the contest and promise to comply with them. We consent that all materials, creations, concepts, likeness, designs, posters, ideas, and intellectual rights and property used mentioned, spoken, and written for, or in connection with, this contest are the property of the Texas Lions MD-2 and may be published and used for any purpose selected by the Texas Lions MD-2 Council of Governors. A chaperone approved by the District (a parent, guardian, or Lion) shall accompany the contestant during their stay at the event where the contest will be judged. We understand that the contestants are to be available, on request, to participate in MD-2 events and activities for the period of one year after the contest.

Contestant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

District Governor: _____ Signature: _____ Date: _____



LIONS CLUBS OF TEXAS MD-2 OPPORTUNITIES FOR YOUTH DISTRICT RESPONSIBILITY CHECKLIST



This page should be **completed by the District's OFY Contest Chairperson for each contest**. For the Outstanding Youth Award, please include this page in both the documents sent via email and mail. Ensure that all the required documents are included in the application packet by marking the box with an 'X'. Attach this page as the first attachment of the submitted documents.

Send by Email (deadline April 19, 2027)

- ☐ Application fee receipt or copy of the check (payable to 'Texas Lions State Convention Fund') in the amount of \$250.00 for each contestant for each contest
- ☐ A color, high-quality, wallet- or passport-size photo is required, such as a current school photo or ID photo. Photos that do not meet this requirement may be omitted from the convention or contest souvenir booklet.
- ☐ Diabetes Awareness Essay
 - ☐ Completed and signed '*Contest Application Form*'.
 - ☐ Essay typed in Times New Roman, 12-point size, double-spaced, complete with word count (at the end of the essay), including the list of bibliography, formatted in APA style for judging purposes.
- ☐ Drug Awareness Speech
 - ☐ Completed and signed '*Contest Application Form*'.
 - ☐ Written speech typed in Times New Roman, 12-point size, double-spaced, including the list of bibliography, formatted in APA style for judging purposes.
- ☐ Outstanding Youth Award
 - ☐ Completed and signed '*Contest Application Form*'.
 - ☐ Essay typed in Times New Roman, 12-point size, double-spaced, including the list of bibliography, formatted in APA style for judging purposes.
 - ☐ Biographical information statement, community service, leadership experience/participation experience. Typed with the same style as essay's.

Send by Mail (postmarked April 19, 2027)

- ☐ Three (3) letters of recommendation.
- ☐ A certified high school transcript.

District OFY Chairperson: _____ Phone: _____

Email: _____

Signature: _____ Date: _____