## LIBERTY IN ACTION ESSAY CONTEST

## REMOVING BARRIERS TO ENTREPRENEURSHIP

NAME			
FIRST		LAST	
AGE*	PLEASE ENTER A VAI	LUE BETWEEN 13 AND 19.	
STUDENT'S EMAIL #	ADDRESS*		
PARENT OR GUARDI	IAN CONTACT INFO	RMATION*	
		(EMAIL OR F	PHONE)
HIGH SCHOOL* _ MUST BE A HIGH S	CHOOL OR HOME SCHO	OOL ORGANIZATION STUDENT	IN THE STATE OF FLORIDA
By signing, I warrant	the truthfulness of t	the information provided	in this essay.
SIGNATURE OF STU	DENT*		
SIGNATURE OF STU	DENT'S PARENT	REQUIRED FOR ENTRIES BY	Y MINORS
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PLEASE ATTACH YOUR ESSAY TO THIS FORM.