

Storytelling Form

Name		Date	
Parent/Chaperone		Cell phone #	
Club	State	Tournament	
Title			
Original Source(s)			
(The original source is the	book, play, antholog	gy, family history, etc., from which the story is tal	ken.)
I have approved this stor	ry for use by my so	on/daughter.	
Parent	Date		
I certify that this story h	as not been used b	y me at any other tournament this year. I ha	ve read the
rules on the Stoa website	e, and to the best o	f my knowledge, this presentation is in compl	liance with
the Stoa rules for this ev	ent.		
Competitor		Date	
I certify that this story h	as not been used b	y my student at any other tournament this yo	ear. I have
read the rules on the Sto	a website and revi	ewed this story. To the best of my knowledge	this
presentation is in compli	ance with the Stoa	rules for this event.	
Parent/Coach		Date	



Storytelling Form Story List

Stories presented this year to date:

Story		Tournament	Date
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