



244 W. Michigan Ave.
Jackson, MI 49201
Phone: 517-788-4099
www.myjdl.com

Young Poets 2026: Registration Form

Please fill out this form for individual poem submissions made in-person or via mail.

NAME: _____ **GRADE:** _____

POEM TITLE: _____

SCHOOL: _____

TEACHER'S NAME: _____ **TEACHER'S EMAIL:** _____

LIBRARY BRANCH: _____

STUDENT OR PARENT/GUARDIAN EMAIL: _____

STUDENT OR PARENT/GUARDIAN PHONE: _____

PARENT/GUARDIAN NAME: _____
(Printed)

PARENT/GUARDIAN: _____ **DATE:** _____
(Signature)

__ (Initial) I verify that I have read and agree to the Young Poets Contest Rules.

__ (Initial) I live, work, or go to school in Jackson County.

Once submitted, all poetry becomes the property of the Jackson District Library, who retains first publishing rights.