Oklahoma National History Day
Todd Family Oral History Award
Entry Form

Name _________________________________________________________________

Street address ______________________________________________________________________________________

City ___________________________ State __________________________

Zip code ________________ Telephone ________________________________

Email _________________________________________________________________

School name___________________________________________________________

Teacher’s name __________________________________________________________

Signature ___________________________ Date ______________________________

Student

Signature ___________________________ Date ______________________________

Parent or guardian (if under 18 years of age)

Interviews should be submitted on CD or DVD along with the release form and entry form to:

Todd Family Oral History Award
Attn: Mallory Covington
800 Nazih Zuhdi Drive
Oklahoma City, OK 73105