

2023 Poison Prevention Poster Contest **ENTRY FORM**



Please write clearly

Student Information		
Student's First and Last Name:	Grade:	Age:
Name of school attending:	Teacher's Name:	Teacher's Email:
Parent/Legal Guardian Information		
Parent/Legal Guardian's First and Last Name:	Phone Number:	Email:
Home Mailing Address		
Street Address:		
Address Line 2:		
City:	State:	Zip Code:
artwork to the Washington Poison Center, and unders	tand it will become the propert e, and contest-related photograp	n Prevention Poster Contest, I agree to release my child's poster y of the Washington Poison Center. I also agree to allow the hs for promotional purposes. By entering, participants agree to
Today's Date:	Child's Name:	Parent/Legal Guardian's Signature:

Attention teachers: if you are submitting a packet of posters from your classroom, please include your name, email address, and school name. Each

Add me to the Washington Poison Center email distribution list (Seasonal Health Alerts & other poison safety information)

poster must have an Entry Form with a signed release (by a parent or guardian) attached.