

***Submit this entry to Eastern Shore Soil & Water Conservation District by April 5, 2019***

***Attach this registration form to the back of your poster.***

**Please check appropriate category**

|  |  |
| --- | --- |
| K-1st |  |
| 2nd-3rd |  |
| 4th-6th |  |
| 7th-9th |  |
| 10th-12th |  |

**This poster is being submitted to earn a Scout VASWCD Poster Contest Patch**

 **2019 NACD/VASWCD**

**POSTER CONTEST**

**Local Entry Form**

**STUDENT**

First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Middle\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip \_\_\_\_\_\_\_\_\_

Phone ( ) E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_

 The poster is an original completed by the student.

 The student received assistance from another person or materials/ideas

from another source. If so, please explain on another piece of paper.

**SCHOOL**

Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Public School \_\_\_\_\_\_\_\_\_\_ Private School \_\_\_\_\_\_\_\_\_\_ Home School \_\_\_\_\_\_\_\_

Address Phone ( )\_\_\_\_\_\_\_\_\_\_\_

City State\_\_\_\_\_\_\_\_\_\_\_ Zip

E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or guardian name (printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent or guardian allowing NACD/District to utilize the poster for

educational or promotional purposes:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date

**SOIL & WATER CONSERVATION DISTRICT**

SWCD Name \_\_\_\_\_\_\_\_\_\_\_\_

Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Questions?**

**Contact Mary Melson, (757) 302-4433 or mary.melson@esswcd.org**

<http://vaswcd.org/poster-contest>