


**2023 NACD Poster Contest
Entry Form**
Attach to back of poster


Please **appropriate category**
 K-1 2-3 4-6 7-9 10-12

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 _____

CONSERVATION DISTRICT

Name _____ Crawford County Conservation District

Contact _____ Sherrie Lech _____ Title _____ District Coordinator

Address _____ 301 Mt Vista Blvd _____ Phone _____ (479) 474-2281

City _____ Van Buren _____ State _____ AR _____ Zip _____ 72956

Email _____ crawfordcountyconservation@gmail.com

*When sending state winning entries to national contest please include:
 State poster contest sponsor, contact name, address, phone and e-mail.
 additional information available at <http://www.nacdnet.org/education/contests/poster/>*