

National Association of Conservation Districts

please include: The name of the state poster contest sponsor, contact name, address, phone number, and e-mai STUDENT Name: First Middle Address: City:State Phone: ()E-mail: School Name: The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form. SCHOOL	Grade: student named her person or n e include a brief	LastZip Age:Zip above. above. naterials/idea f explanation	: as before you
Name: First Middle Address: City:State Phone: ()E-mail: School Name: The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form.	Grade: student named her person or n e include a brief Home Sc	Zip Age: above. naterials/idea f explanation	: as before you
Name: First Middle Address: City:State Phone: ()E-mail: School Name: The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form.	Grade: student named her person or n e include a brief Home Sc	Zip Age: above. naterials/idea f explanation	: as before you
Address:State City:State Phone: ()E-mail: School Name: The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form.	Grade: student named her person or n e include a brief Home Sc	Zip Age: above. naterials/idea f explanation	: as before you
Phone: (E-mail: School Name: The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form.	Grade: student named her person or n e include a brief Home Sc	Age: above. naterials/idea f explanation hooled	as before you
Phone: (E-mail: School Name: The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form.	Grade: student named her person or n e include a brief Home Sc	Age: above. naterials/idea f explanation hooled	as before you
School Name: The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form.	Grade: student named her person or n e include a brief Home Sc	Age: above. naterials/idea f explanation hooled	as before you
The poster is an original completed by the The student received assistance from anot from another source. If you answered "yes," pleas submit this entry form.	student named her person or n e include a brief Home Sc	above. naterials/idea f explanation hooled	as before you
The student received assistance from anot rom another source. If you answered "yes," pleas submit this entry form.	her person or n e include a brief Home Sc	naterials/idea f explanation 	before you
submit this entry form.	Home Sc	hooled	
	Home Sc		
SCHOOL	Home Sc		
Toachar:	Home Sc		
Teacher: Please choose: Public School Private School			
	_ Phone: (1	
Address:	7:	_)	
City:State:	Zip:		
E-mail: Printed name of parent or guardian name:			
ooster submission for educational or promotional		Date	
Name:	Title		
Address:Phone			
City: State:	·/	'in·	
Email:			
SPONSORING AGENCY			
Name:			
Contact:	Title:		
Address:			
Phone: () Email:		0 00000	
Lindii			
National He	adquarters		
509 Capitol Court, NE, V	Vashington, DC		
Phone: (202) 547-6223 www.nac		6450	