



Please  appropriate grade category
___K-1 ___2-3 ___4-6 ___7-9 ___10-12

2017 Poster Contest Entry Form

STUDENT INFORMATION

Name: First _____ Middle _____ Last _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

School Name: _____ Grade: _____ Age: _____

_____ The poster is an original completed by the student named above.

_____ The student received assistance from another person or materials/ideas from another source. If you answered "yes," please explain on another piece of paper.

Signature of parent or guardian allowing the Richland Soil and Water Conservation District and the State and National Associations of Conservation Districts to use the poster submission for educational or promotional purposes:

Signature _____ Date _____

Parent or guardian name (printed) _____

SCHOOL INFORMATION

Please check one: Public School _____ Private School _____ Home School _____

Address _____

City: _____ State: _____ Zip: _____

Teacher: _____

Phone: _____ E-mail: _____

CONSERVATION DISTRICT

Richland Soil and Water Conservation District
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