

# Artwork Submission Form

## 2010 Poison Prevention Poster Contest

**Important Note:** Please fill in (type or print) the requested information.

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent's Name \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of School \_\_\_\_\_ City \_\_\_\_\_

**Please tape this form to the back of the poster. If you have any questions, please e-mail**  
[info@safekidsspringfield.org](mailto:info@safekidsspringfield.org)