

Arbor Day Poster Contest  
Release Form: Please print clearly and  
attach to the back of each poster

Student's Name: \_\_\_\_\_  
(Please Print Clearly)

School: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_

Teacher: \_\_\_\_\_

School's Phone: \_\_\_\_\_

Teacher email (required): \_\_\_\_\_

I HEREBY CERTIFY THAT THIS POSTER WAS CREATED ENTIRELY BY THE STUDENT ABOVE AND IS THE STUDENT'S ORIGINAL ARTWORK. I AGREE THAT IT MAY BE OFFERED FOR PUBLIC DISPLAY OR PUBLICATION AT SOME TIME DURING OR AFTER THE CONTEST. I UNDERSTAND THAT THIS POSTER BECOMES THE PROPERTY OF THE STATE OF MARYLAND AND MAY BE REPRODUCED. THE ONLY INFORMATION THAT WILL BE RELEASED IS THE STUDENT'S NAME, GRADE AND HOMETOWN.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

Date \_\_\_\_\_

Date \_\_\_\_\_