

Entry Form

DETER ATABASE

FULL NAME:	
AGE:	GRADE:
HOME ADDRESS:	
TELEPHON	E:
Where did you	get this entry form? Please list sponsorship information below.
SPONSOR:_	
SPONSOR N	NAME:
ADDRESS:	
TELEPHON	E:
EMAIL:	

CREATE an original poster that ties in with the theme for your grade. Grades 1 & 2: "Tobacco Is Bad for Your Body." Grades 3 & 4: "Tobacco Affects Other People." Grades 5 & 6: "Why I Won't Start Smoking." Hold the paper like this: ■ not this: ■. Be sure to use white 8½" x 11" paper. Remember to check your spelling. **Photocopy this entry form and create your poster on the back side.**

DESIGN your poster using crayons, colored pencils, or markers. Each poster will be judged on originality, artistic value, and how well it relates to the theme.

COMPLETE this contest entry form. Please print information clearly and exactly as you would like it to appear in the anti-tobacco calendar if you win.

GIVE your poster to your sponsor to send in, or mail it to **Anti-Tobacco Poster Contest, Massachusetts Medical Society, Department of Public Health and Education, 860 Winter Street, Waltham, MA 02451**. All entries become the property of the Massachusetts Medical Society and will not be returned.

Four winning entries will be selected in each grade category. Winners will receive a \$50 gift certificate and will be recognized (along with their sponsors) at a formal ceremony, on the Society's website (www.massmed.org), and in press releases to local news media.

ENTRIES MUST BE RECEIVED BY FEBRUARY 23, 2018.

Contest winners will be notified by mail at the end of April.

Sponsors: Please photocopy this entry form onto white $8\frac{1}{2}$ " x 11" paper for students. Please organize and collate entries by grade.

Students: Please use the back of this entry form to create your poster.