

Participant Information/Permission Form

This document must be submitted for each student participating in the production of your billboard design entry.

The deadline for this document and the design is **October 29, 2021**.

Please print this form and submit via email to kevers@loraincountyhealth.com

Title of Design Entry

Last Name

First Name

Age*

School Name

Name of Referring Teacher

Return Address (if different from school address)

Participant

I have completely read the full Official Rules and Guidelines of this contest, and I understand and agree to abide by those rules. Each participant understands that if her/his design is selected as the winner, s/he will relinquish all claims, rights (including any moral rights), and benefits related to the display, modification, reproduction, publication, distribution, use, and other exploitations of the work, other than the prize awarded to the winning entry. This form must accompany all contest submissions.

***If you are 18 or younger, you must have a parent or guardian's signature on this form.**

Participant Signature Date

Parent/Legal Guardian

I have completely read the full Official Rules and Guidelines of this contest, and I understand my child is planning to participate in submitting a design. I hereby grant full permission and authority to the Lorain County Safe Communities Coalition and State Farm, and anyone authorized by the Lorain County Safe Communities Coalition and State Farm, to download, use, copy, publish, and display my child's design as contained in this design entry.

Parent/Guardian Printed Name

Parent/Guardian Signature Date