



America Recycles Day Poster Contest Poster Release Form

THIS FORM MUST BE COMPLETED AND INCLUDED WITH EACH POSTER SUBMISSION

School/organization Information

Name: _____

Address: _____

City, state, zip code: _____

Phone: _____

Teacher information

Name: _____

E-mail: _____

Student information

Name: _____

Grade: _____

What do you hope someone learns from seeing your poster?

Why is recycling important to you?

I hereby certify that this poster was created entirely by the above-named student, is the student's original artwork, and includes no copyrighted characters or materials. I authorize Dakota County to use the poster for display and publication in perpetuity without the requirement of any remuneration to the student. By participating in this contest, I understand the student's name, school, grade, and responses may be released or published. By participating in the contest, I authorize Dakota County to use my child's likeness in photograph(s) in any and all of its publications, including web-based publications, newsletters, social media posts, displays, presentations about or to promote the contest, without payment or other consideration, and that any photograph taken by the County or others of my child related to the contest will become the property of the County and will not be returned.

Signature of student: _____

Printed name of student: _____

Signature of parent/guardian: _____

Printed name of parent/guardian: _____

Date: _____