



Poster Contest Application

Thank you for participating in the 37th Annual National Missing Children's Day Poster Contest! Please be sure to complete this application and ask your parent/guardian to complete the consent and release form before submitting your poster to your State Contest Manager. Posters that are submitted without an application and consent and release form included will not be considered for the contest.

Name: _____

Age: _____

School: _____

School Phone: _____

School Address: _____

City: _____

State: _____

Zip Code: _____

Educator's Name: _____

Educator's Email: _____

Salutation (circle one): Mr. / Mrs. / Ms.

Principal's Name: _____

Principal's Email: _____

Salutation (circle one): Mr. / Mrs. / Ms.



36th Annual Missing Children's
Day Poster Contest Winner
Madison D. | Kentucky



Please tell us about your poster and why you created it: *(100 words or less)*

Artist's Biography. Tell us a little bit about yourself! *(100 words or less)*
