



# Official Entry Form

This section must be completed by entrant

Grade 3-5

Grade 6-8

Grade 9-12

I wish to enter the Pennsylvanians for Fair Funding Poster Contest in the age division checked above. I realize my entry becomes the property of Pennsylvanians for Fair Funding.

Full Name of Entrant

Date of Birth

Street Address

\_\_\_\_\_, Pennsylvania

City

Zip

Telephone Number

email address

This section to be completed by Parent/Guardian

The undersigned hereby approves the Entrant's registration and participation in the Pennsylvanians for Fair Funding poster contest as well as all applicable rules.

Full Name

Signature