**Artwork Submission Form - Wyoming Radon Poster Contest**

**Important Note to Teacher:** Please fill in (type or print) the requested information under the Teacher and Newspaper sections before making copies of this form for your students. Please ask your students to ***clearly print*** their information.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Teacher** | | | | |
| Name | | Email: | | |
| Name of School |  | Phone | | |
| Address | | City | State | Zip |

|  |  |  |  |
| --- | --- | --- | --- |
| **Student** | | | |
| Name | Phone | | |
| Address | City | State | Zip |
| Title of Artwork |  | Grade | Age |

|  |  |  |  |
| --- | --- | --- | --- |
| **Local Newspaper** |  |  |  |
| Name |  | Phone |  |
| Address | City | State | Zip |

With this contest entry, I give permission, without restriction, to the State of Wyoming Department of Health Wyoming Cancer Program to use this poster image, along with the winner's name and photo, for educational and promotional use, as directed by the program, without payment or remuneration for any appearances, use or displays. I acknowledge the program's right to crop or treat the display of my photograph or poster image at its discretion. I understand that the program may use these materials in printed and internet publications and/or presentation that they produce, and that they may also give these materials and information to news media and other organizations for educational or promotional purposes, including the National Poster Contest Sponsors and the EPA. Mail submissions to WY Radon Poster Contest ● Wyoming Cancer Program ● 122 West 25th Street, 3rd Floor West ● Cheyenne, WY 82002.

|  |  |  |
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| **Parent/Guardian** |  |  |
| Signature of Parent/Guardian of Participant | | Date |
| Print Name | |  |
| Phone | Email | (needed for award communication purposes) |
| With this poster entry, your household is eligible to receive a free home radon test. If you indicate yes on this form, a radon test will be sent directly to your home with testing instructions. Each radon test covers 2000 square feet so please indicate the size of your home so that we may send the appropriate number of kits. | | |
| □Yes, please send a radon test | □No, please do not send a radon test | Size of home (Square Footage) \_\_\_\_\_\_\_ |

**Please tape this form to the back of the poster.**