

HEALTHY ME, DRUG FREE POSTER CONTEST

2024 ENTRY FORM

Entries must be turned in with this form to the OSCA no later than 4:30 pm on Tuesday, Sept. 24, 2024

ENTRY LEVEL	
Grades 4-6 _____	Grades 7-9 _____

STUDENT INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Name: _____

Phone: _____ Email: _____

I allow the OSCA to utilize this poster submission for promotional purposes.

Signature of Parent/Guardian

Date

SCHOOL INFORMATION

School Name (write home school if applicable): _____

Teacher Name: _____

School Address: _____

City: _____ State: _____ Zip: _____

Teacher Email: _____

Contact Info:

Ohio State Chiropractic Association
172 E. State St. Suite 502
Columbus, OH 43215
614-229-5290
osca@oscachiro.org
www.oscachiro.org

GOOD LUCK!

