

Rules for artwork submission to the Poison Prevention Week Poster Contest

The purpose of the contest is to educate the public about the dangers of poisonings and poison prevention. Regional first, second, third place and honorable mention winners will be forwarded to the National Poison Prevention Week Council for judging at the national level. By submitting an entry to the poster contest, the applicant agrees to the following guidelines:

- The artist allows the National Poison Prevention Week Council to adapt, reproduce and distribute the posters nationally.
- Posters will not be returned unless requested *at the time of submission* by the artist.
- Submitted posters to the National Poison Prevention Week Council are property of the Council, and may be modified, distributed, and reproduced at the will of the council without notification of the submitting child.
- Information such as the following will be added to the National Poison Prevention Week Council's winning poster: Poison Prevention Week date, artist's first name, Poison Prevention Week Council website URL.
- Public recognition information will be in accordance with all child protection laws.
- Winning regional posters will be judged by members of the National Poison Prevention Week Council and may be posted on the internet for public voting.
- The artist of the National Poison Prevention Week Council's winning poster will be notified by October, 2013. Affiliated teachers will be notified as well.
- An Artwork Submission and Consent/Release Form must be taped to the back of each entry for consideration.
- In addition, clearly print the artist's name and school in the lower right-hand corner on the back of the poster.
- The contest has three divisions: Kindergarten through 2nd grade; 3rd through 5th grade; and 6th through 8th grade.
- The themes of the poster contest are ***Children Act Fast, So Do Poisons*** and ***Poisonings Span a Lifetime***. Entries should illustrate a message that communicates that poisonings can happen to people of any age including children, adults and the elderly.
- Entries can not include any state or regional logos or symbols. Trademark symbols, company names, or characters (e.g. Snoopy, Clorox, Tide, Tylenol, Motrin) are prohibited.
- As the winning poster is an example for other children, misspelling words on posters may disqualify a poster from consideration.
- Digital, computer, or electronically generated art is prohibited.
- There are no size requirements for submission. Entries can be horizontally or vertically oriented.
- Original art must be submitted. Copies will not be accepted.
- The deadline for regional entry is Monday, Jan. 28, 2013.
- A typed or printed (no cursive) list of the names of the students and the teacher's full name should be included.
- Poster entries should be mailed to:
 - Florida/USVI Poison Information Center - Jacksonville
 - ATTN: Poster Contest
 - 655 West 8th Street, Box C-23
 - Jacksonville, FL 32209

If you have any questions, please contact Phyllis Bell-Davis @ 904.244.4465 or bdavis@poison.ufl.edu; or Courtney Wilson, Wilson@aapcc.org, with the subject line: "poster question".

**Poison Prevention Week Council
Artwork Submission Form
2014 Poison Prevention Poster Contest**

Please clearly print or type all information.

1. Student name _____ Grade _____ Age ____ Phone _____

Home address _____ City _____ State _____ Zip _____

Title of Artwork _____

This artwork is original and created by me (please sign) _____ **Date** _____

2. Teacher/Adult **name** _____ **Email address** _____

Name of school (if applicable) _____ School phone _____

School address _____ City _____ State _____ Zip _____

This artwork is original and was created by the above student (please sign) _____

3. Newspaper to be notified for winning posters (optional)

Name _____ City _____ State _____

4. **Parent signature** _____ **Email** _____

Please tape this form to the back of the poster and mail by deadline of Jan. 28, 2013 to: Florida/USVI Poison Information Center - Jacksonville; ATTN: Poster Contest; 655 W. 8th St., Box C-23; Jacksonville, FL 32209. If you have any questions, please contact Phyllis Bell-Davis @ 904.244.4465 or bdavis@poison.ufl.edu; or Courtney Wilson, Wilson@aapcc.org, with the subject line: "poster question".

**Consent/Release Form for Minors
Florida/USVI Poison Information Center - Jacksonville**

Child's Name _____ Date _____

Authorization to Publicly Release Information (child's/school's name, likeness, drawings, photographs)

I hereby give permission to the Florida/USVI Poison Information Center - Jacksonville, and its affiliated host institutions, Shands Jacksonville Medical Center, Inc. and University of Florida, to use information including child's name, likeness, drawings, photographs provided to, or taken by, and members of these organizations. I understand that these items of information, in addition to the school's name, may be used in newspapers, magazines/journals, brochures, websites, television, newsletters, and/or film for the sole purpose of enhancing poison awareness and prevention among the public.

I further understand that the information described above may be used indefinitely unless otherwise indicated in writing.

I hereby release and discharge the Florida/USVI Poison Information Center - Jacksonville, Shands Jacksonville Medical Center, Inc., and the University of Florida from any liability resulting from:

- the use of information described above
- any alteration that may occur in the processing and/or application of the information described above

I understand that I have the right to revoke this authorization, but only to the extent that the Florida/USVI Poison Information Center - Jacksonville, Shands Jacksonville Medical Center, Inc. and the University of Florida have not already relied upon this authorization and that the permission to use the information described above will not expire unless revoked. I may revoke this authorization by providing a written statement to the Florida/USVI Poison Information Center - Jacksonville, 655 West Eighth Street, Jacksonville, FL 32209.

_____ Signature of (please check appropriate box)	_____ Date
Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Next-of-Kin <input type="checkbox"/>	
_____ Witness Signature	_____ Date

Please tape this form to the back of the poster and mail by deadline of Jan. 28, 2013.