



National Association of Conservation Districts

Please check appropriate category:

K-1 2-3 4-6 7-9 10-12

PLEASE EMAIL THIS DOCUMENT/FORM FOR EACH SUBMITTED POSTER

STUDENT

Name First: _____ Middle: _____ Last: _____

Address: _____ Students Age: _____ Grade level: _____

(Address Optional)

Please circle one:

Yes or No: This poster is the original work of the student named above.

Yes or No: The student received assistance from another person or materials/ideas from another source. If answered "yes," please include a brief explanation.

PARENT/GUARDIANS SIGNATURE _____ **DATE** _____

Printed name of parent or guardian name: _____

Parent/Guardians signature will allow the NACD/the Conservation District listed below to utilize poster submission for educational or promotional purposes.

Email Address _____ Phone Number: () _____

SCHOOL/GROUP/ORGANIZATION

Please choose: Public School Private School Home School Organization Other

Name: _____

Contact: _____ Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: () _____

CONSERVATION DISTRICT

Name: Gasconade County Soil & Water Conservation District

Contact: Diana M Dean Email Address: Diana.Dean@swcd.mo.gov

Address: 314 S Olive St. City: Owensville State: MO Zip: 65066

Phone Number: 573-437-3478 x 3