

Georgia Poison Center



Grady Health System • 80 Jesse Hill Jr. Drive, SE • Box 26066 • Atlanta, GA 30303-3050 • www.georgiapoisoncenter.org **POISON HELP: 1.800.222.1222 •** ADMINISTRATION: 404.616.9237 • FAX: 404.616.6657 • EDUCATION: 404.616.9235

POSTER CONTEST GUIDELINES

- 1. This contest is open to students in grades Kindergarten through 5th, only. Only one entry per artist is allowed.
- 2. Poster artwork should convey one of the following themes:
 - Children Act Fast ... So Do Poisons
 - Poisonings Span a Lifetime
 - Home Safe Home
 - Medicine Safety
- 3. Entries should not include commercial/cartoon characters (examples: Dora the Explorer or SpongeBob Square Pants). State or regional logos or symbols (Mr. Yuk), trademark symbols and company or product names (Clorox, Tylenol, Motrin) are not allowed.
- 4. Please do not print the artist's name on the front of the entry. Instead, each poster contest entry must have a completed and signed entry/release form taped to the back.
- 5. Entries should be no larger than 11" x 17" and can be horizontally or vertically oriented.
- 6. Artwork must be original and created by the artist, not his or her parents, teachers, or other adults.
- 7. Original artwork must be mailed to the GPC for in-person judging. Copies or scans of the artwork will not be accepted.
- 8. The use of bold, bright colors is suggested.
- 9. The GPC encourages the use of markers, crayons, paint, pencils, chalk, construction paper, and other flat media. Non-flat, three-dimensional, collage-type entries cannot be scanned and will be disqualified.
- 10. The winning artist will be recognized at the Georgia Poison Center December staff meeting on Thursday evening, December 12.

To submit your poster contest entries, please mail all posters and Entry/Release Form to:

Georgia Poison Center c/o Britni Overall 80 Jesse Hill Jr. Dr. SE, Box 26066 Atlanta, GA 30303

October 18, 2019 is the deadline for receipt of the poster



Georgia Poison Center



Grady Health System • 80 Jesse Hill Jr. Drive, SE • Box 26066 • Atlanta, GA 30303-3050 • www.georgiapoisoncenter.org **POISON HELP: 1.800.222.1222 •** ADMINISTRATION: 404.616.9237 • FAX: 404.616.6657 • EDUCATION: 404.616.9235

POSTER CONTEST ENTRY/RELEASE FORM

August 2019

Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date:	Student Information
Grade: Complete Home Address: Artwork Title: This artwork is original and was created by me (please sign): Teacher or Sponsoring Adult Information Name: Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release FOR GOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week withing poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, lournal advertisements. PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heiris, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date:	Name:
Complete Home Address: Artwork Title: This artwork is original and was created by me (please sign): Teacher or Sponsoring Adult Information Name: Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release POR GOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, fournal adventisements, PowerPoint presentations or consumer press. I also consent to the sue of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council or storing and their heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date:	Age:
Artwork Title: This artwork is original and was created by me (please sign): Teacher or Sponsoring Adult Information Name: Email: Phone Number: Name of School: Complete School Address: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release Parent or Guardian Information Name: Email: Phone Number: Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week council the prevention Week council the prevention of the prevention of the prevention of the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard.	Grade:
Treacher or Sponsoring Adult Information Name: Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, iournal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council, all persons acting that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date:	Complete Home Address:
Teacher or Sponsoring Adult Information Name: Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsteters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall incure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard.	Artwork Title:
Name: Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release FOR GOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, iournal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. It hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, prevention wheek Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives successors and assigns. It shall be binding upon me and my heirs, legal representatives and assigns. It had the binding upon me and my heirs, legal representatives and assigns. It had the property of the Georgia Poison Center and the Poison Prevention Week Council and their heirs, legal representatives. It hereby warrant that I am of full age and have every right to contract for the minor in the above regard.	This artwork is original and was created by me (please sign):
Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week Council the irrevocable and unrestricted in character or form, made available through websites, newsletters, educational materials, lournal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date: Date:	Teacher or Sponsoring Adult Information
Email: Phone Number: Name of School: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, lournal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date: Date:	Name:
Phone Number: Complete School Address: Parent or Guardian Information Name: Email: Phone Number: Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, iournal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date: Date:	Email:
Parent or Guardian Information Name:	Phone Number:
Parent or Guardian Information Name: Email: Phone Number: Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date: Date:	Name of School:
Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date:	Complete School Address:
Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall insure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date:	Parent or Guardian Information Name: Email:
Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature: Date: Date:	Phone Number:
	Release FOR GOOD AND VALUABLE CONSIDERATION herein acknowledged as received, I hereby grant the Georgia Poison Center and the Poison Prevention Week Council the irrevocable and unrestricted right and permission to adapt, reproduce, sell or distribute the Poison Prevention Week winning poster, in whole or in part, composite or distorted in character or form, made available through websites, newsletters, educational materials, journal advertisements, PowerPoint presentations or consumer press. I also consent to the use of any printed matter in conjunction therewith. I further consent to the publication of my name, age, school and hometown on the poster. I hereby waive any right that I may have to inspect or approve the finished product or products or the advertising written matter that may be used in connection therewith or the use to which it may be applied. I have read the above authorization, release and agreement prior to its execution and I am fully familiar with the contents thereof. This release shall inure to the benefit of the Georgia Poison Center and the Poison Prevention Week Council, all persons acting under its permission or authority, those for whom the Poison Prevention Week Council is acting and their heirs, legal representatives, successors and assigns. It shall be binding upon me and my heirs, legal representatives, successors and assigns. In addition, participants agree to release their poster and understand that it will become the property of the Georgia Poison Center. I hereby warrant that I am of full age and have every right to contract for the minor in the above regard. Parent or Guardian Signature:
	Please print and tage this form to the back of the poster

Please print and tape this form to the back of the poster.

Poster entries should be mailed to: Georgia Poison Center; c/o Britni Overall; 80 Jesse Hill Jr. Dr. SE, Box 26066, Atlanta, GA 30303

Poster contest entries must be received by October 26, 2018.

Complete poster guidelines are available here: http://www.georgiapoisoncenter.org/poison-prevention-poster-video-contest/ If you have any questions please contact the Georgia Poison Center Education Department at 404-616-9235.