



Poster Contest Entry Form

Domestic Violence Awareness or Stop Domestic Violence

Please complete and attach this Entry Form to your poster.

Artist Information please print legibly

Name: _____ Grade in School: _____

Home Mailing Address: _____

Phone Number: _____ Email Address: _____

School Information

Name: _____

Address _____

Phone Number: _____ Principal's Name: _____

Principal's Email _____

The following statement must be signed by a parent:

“I understand the poster contest rules, and hereby grant the Soroptimist International of San Francisco or their assignees permission to use my child’s artwork from the Domestic Violence Awareness poster contest for the purpose of illustration, publication or broadcast.”

Parent Name (printed): _____

Parent Signature: _____

Date: _____

Send or deliver your poster and Entry Form by December 15th to:

Soroptimist International of San Francisco
c/o MG West Inc.
611 Mission Street, Third Floor
San Francisco, CA 94105