

**2025 Drug & Alcohol-Free**

**Calendar Contest Entry Form**

To ensure that each entry for the 2025 calendar contest is the original work of the student artist, the Tangipahoa Parish SADD Coalition requires that this form be completed and signed by each student. The entry form must be attached to the artwork submitted for the contest. Artwork should be completed on an 8.5x11 plain white piece of paper. Entries must be submitted by **January 31, 2025,** and can be hand-delivered to any Tangipahoa Parish Branch Library. Visit [tangilibary.com](https://www.tangilibrary.com/Default.aspx) for branch locations. Please attach the entry form behind the artwork using a **paper clip**. **Please do not staple the entry form to your artwork.** Entries should depict the benefits of living an alcohol-free life.

**ARTIST INFORMATION:**

Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Agreement of Originality:**

Students are responsible for entering only original works of art entirely produced by the above-named student that has been submitted with this form.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the above-named student, hereby acknowledge and attest to the following:

* The artwork for the 2025 Drug and Alcohol-Free Calendar Contest submitted with this form is my **sole original creation**.
* The artwork follows the contest rules on originality and has not been copied from any previously published photo or artwork.

Student’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VIDEO/PHOTO RELEASE:**

Is the student a minor (under the age of 18)? Circle: YES NO

**If yes, the video/photo release must be completed by a parent/legal guardian. Otherwise, the release can be completed by the student.**

The undersigned hereby authorizes or ratifies using student quotes, taking and using photographs, films, audiotapes, and/or videotapes concerning the calendar contest. This includes any and all events hosted by Tangipahoa Parish SADD through Florida Parishes Human Services Authority (FPSHA) with LAPFS II funds for use by Tangipahoa Parish SADD. Materials used are for the sole purpose of public relations, and internal or external communications, including use for or by the news media, and further authorizes the use of the undersigned’s name with said photos, film, print, or tape-in advertising activities, television commercials, or broadcasts, radio ads or broadcasts, print ads, annual reports, brochures, web sites, online outlets, outdoor billboards, business communications, books, internal communications, e-newsletters, emails, social media platforms or outlets.

PRINT Parent/Guardian’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_