ENTRY FORM, RELEASE AND CERTIFICATE OF AUTHENTICITY
PCBA LAW DAY COMPETITION

_____
First and Last Name (Please Print or Type)

_____
Grade Level Competition Category School

_____
Home Address (Street, City, State and Zip Code)

_____
Telephone Number E-mail Address

CONSENT AND RELEASE

I, _____ (print name), agree to allow the Polk County Bar Association's Law Day Committee to use and display my artwork, music, video, essay or poetry entry wherever, whenever and however it sees fit to do so, including, but not limited to, display in various public places in and around Polk County and publication in a newsletter or other printed or electronic medium I further agree to allow the Polk County Bar Association to take and use photographs of myself, my child/student during the award ceremony and Law Day event. I release the Polk County Bar Association, along with its officers, employees, agents, volunteers or others associated with this competition, from and against any liability for any damages that may occur in connection with this competition.

Signature of Student Entrant: _____

I agree and consent to the above.

Signature of Parent or Guardian: _____

CERTIFICATE OF AUTHENTICITY
I/We certify that this entry is the original work created by:

_____
(Name of Student)

_____
(Student's Signature)

_____
(Signature of Teacher, Parent or Guardian)

_____
Name of Teacher, Parent or Guardian (Please Print or Type)

_____
Teacher's Telephone number Teacher's E-mail Address

_____
Parent's/Guardian's Telephone Number Parent's/Guardian's E-mail Address