



Name of Entrant: _____ Age: _____

Address: _____

Email Address: _____

Phone Number: _____

Category	School/Organization (if applicable)	Group Submission
<input type="checkbox"/> Lower School (Pre-K - 4th Grade)	_____	<input type="checkbox"/>
<input type="checkbox"/> Middle School/Jr. High (5th - 8th Grade)	_____	<input type="checkbox"/>
<input type="checkbox"/> High School (9th - 12th Grade)	_____	<input type="checkbox"/>
<input type="checkbox"/> Young Adult (Ages 19-24)	_____	<input type="checkbox"/>
<input type="checkbox"/> Adult (25+)	_____	<input type="checkbox"/>

***Note: If submitting an entry as part of a group, each individual of the group must complete an Entry Form as an Entrant, and the group must make one (1) single submission package with all Entry Forms together.**

Poster: Please send original Poster (horizontal or vertical; at least 8.5" x 11" but not larger than 22" x 28")

Tag Line/Title for Poster: _____

I have read and understand the 2025 Louisiana Derby Poster Contest Rules (The "Contest Rules"). I hereby accept the rules and agree to be bound by them in connection with the 2025 Louisiana Derby Poster Contest.

Name

I acknowledge that this is my work created by hand, without the use of AI or digital image generation of any kind.

Name

TO BE COMPLETED IF ENTRANT IS A MINOR, NOT EIGHTEEN (18) YEARS OF AGE:

I represent and warrant that I am the parent or legal guardian of the Entrant. I do hereby consent to the Entrant participating in the 2025 Louisiana Derby Poster Contest. I have read and understand the Contest Rules. On behalf of the Entrant, I hereby accept the Contest Rules and agree to be bound by them in connection with the 2025 Louisiana Derby Poster Contest.

 Print Name of Parent or Legal Guardian:

 Signed Name of Parent of Legal Guardian:

Submit by Mail:
 LA Derby Poster Contest
 ATTN: Marketing Manager
 1751 Gentilly Blvd
 New Orleans, LA 70119