Town of Smithtown
Horizons Counseling and Education Center
Youth Bureau

Alcohol Awareness Poster Contest
Release Form

Participant's Name:_____
School:_____
Town:_____
Telephone:_____
Email: _____

I authorize the Horizons Counseling and Education Center and Youth Bureau to publish the Alcohol Awareness poster in its organizational publications. These publications include, but are not limited to: newsletters, materials, constant contact, websites, news stories, social media etc.

Contest winner will have their poster published on future prevention activity stickers.

_____ _____
Participant's Signature Date
Print Name:_____

If youth is under the age of 18, parental consent is required.

_____
Parent or Guardian Signature Date
Print name:_____