

2020
Farm-City Poster Contest
(Please fill out the entire form.)

Date: _____ Grade: _____

County: _____ Age: _____

Student's Name: _____

Student's Home Address: _____

Student's Phone Number: _____

Parent's Name: _____

Parent's Email: _____

School Name: _____

School Address: _____

School Phone Number: _____

Teacher's Name: (Print First & Last name) _____

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Alabama Farmers Cooperative
Alabama Ag In The Classroom
Alabama Farmers Federation/Alfa Insurance