

NCAP POSTER CONTEST ENTRY FORM

Submission Due Date: January 10, 2024



This Entry Form must be completed and submitted with your entry.
Email this form and your poster submission to poster@communityactionpartnership.com

Contact Information

Artist's full name: _____

Is your Executive Director/CEO aware of this submission? Yes
 No
 N/A
If N/A, please explain:

Name of your Community Action Agency or State Association: _____

Agency/State Association location (city/state): _____

Artist's email address: _____

Artist's mailing address: _____
Address Line 1

_____ Address Line 2

_____ City State Zip

Artist's phone number (including area code): _____
Telephone number with area code

Submission Category

Please check the category in which you are competing:

- Historic
- Future

Demographic Information (all optional)

Please note NCAP is collecting demographic information to ensure that the final array of submissions provided to the 60th Anniversary Committee represents the diversity of the Community Action Network. This information will remain confidential with NCAP staff and consultants and will not be provided to the Committee. NCAP encourages entrants to complete the demographic section; this information is optional.

Age

- < 18 years*
- 18–29 years
- 30–40 years
- 41–50 years
- 51–65 years
- 65+ years

*Attach permission letter from parent/guardian.

Race (select all that apply)

- American Indian or Alaska Native
- Asian
- Black or African American
- Middle Eastern or North African
- Native Hawaiian or Pacific Islander
- White
- Some other race _____

Ethnicity

- Hispanic or Latino/Latina
- Not Hispanic or Latino/Latina

Do you consider yourself to be:

- Heterosexual or straight
- Gay
- Lesbian
- Bisexual
- Not listed above _____

Gender

- Woman
- Man
- Transgender woman
- Transgender man
- Non-binary/non-conforming
- Not listed above _____



Questions? Email poster@communityactionpartnership.com