



The American Legion Department on New Jersey
171 Jersey Street
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VETERANS STRENGTHENING AMERICA!



POST
2026-2027

SAFETY POSTER CONTEST REPORT FORM

POST
2026-2027

(PLEASE PRINT OR TYPE)

FROM _____ POST NO. _____
(Post Safety Chairperson)

SEND TO: **COUNTY SAFETY CHAIRPERSON** (No later than **January 13, 2027**)

Listed below is the full information required concerning POST NO. _____ Poster winner (s)
which is submitted for County Contest judging: **Post Chairperson** may submit three (3) entries to County.

(Full Name of Student) ☐ Male ☐ Female

(Complete mailing address of student)

(School attended, Name of Teacher and Grade)

(Full Name of Student) ☐ Male ☐ Female

(Complete mailing address of student)

(School attended, Name of Teacher and Grade)

(Full Name of Student) ☐ Male ☐ Female

(Complete mailing address of student)

(School attended, Name of Teacher and Grade)

(Signature of Post Chairperson) Post # _____

(Home Address) County _____

(Telephone Number) _____

(E-mail address) Date _____