



FIGHT SMOKING

Creative Kids Competition

by Anti-Smoking International Alliance-London

Date of Submission:

Participants Information

First Name:

Last Name: Date of Birth:

Age: Gender: Grade Level: Name of School:

Address: Country:

Contact No.: Email Address:

Essence and Significance of the Entry:

Parent Consent:

I _____, hereby consent the participation of my _____, _____ (Child name) to the "Fight Smoking" Creative Kids Competition, initiative of Anti-Smoking International Alliance, London.

I understand that the creative entry of my _____ will be used for the advocacy of the alliance to combat smoking for our generation and the next.

I agree to be tagged on the Instagram post of Anti-Smoking International Alliance for the entry of my child.

Guardian Instagram Account:

Signature Over Printed Name

To be filled up by the Alliance

Entry No.