

ONTARIO KNIGHTS OF COLUMBUS

DUE BY:
FEBRUARY 1st

SUBSTANCE ABUSE AWARENESS POSTER CONTEST PARTICIPATION FORM



PLEASE INDICATE THE NUMBER OF PARTICIPANTS IN YOUR COUNCIL CONTEST

AGE GROUPS	8	9	10	11	12	13	14	15	16	17	TOTALS
ALCOHOL ABUSE											
DRUG ABUSE											
TOTALS											

CONTEST PARTICIPATION REPORT FORM: Immediately following the local council contest, the Grand Knight will complete and submit this Substance Abuse Awareness Poster Contest Participation Form (SO-4001) to Ontario State Council and to the State Chairman. This form provides Ontario State office with valuable participation statistics as well as feedback about the program in general.

**PERSONAL COMMENTS OR OBSERVATIONS CONCERNING THE ONTARIO
KNIGHTS OF COLUMBUS SUBSTANCE ABUSE AWARENESS POSTER CONTEST:**

SIGNED: _____
GRAND KNIGHT

COUNCIL NUMBER: _____

CITY/TOWN: _____

FORWARD TO: Ontario State Council, State Chairman

COPY TO: Council File

SO-4001 07/18