



EIGHTH DAY ESCAPE Contest Entry Form

Participant Information

Name: _____ Date of Contest Entry: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Alabama State Park(s) Visited:

- | | | | |
|---------------------------------------|--|--|---|
| <input type="checkbox"/> Blue Springs | <input type="checkbox"/> Buck's Pocket | <input type="checkbox"/> Cathedral Caverns | <input type="checkbox"/> Cheaha |
| <input type="checkbox"/> Chewacla | <input type="checkbox"/> DeSoto | <input type="checkbox"/> Frank Jackson | <input type="checkbox"/> Gulf |
| <input type="checkbox"/> Joe Wheeler | <input type="checkbox"/> Lake Guntersville | <input type="checkbox"/> Lake Lurleen | <input type="checkbox"/> Lakepoint |
| <input type="checkbox"/> Meaher | <input type="checkbox"/> Monte Sano | <input type="checkbox"/> Oak Mountain | <input type="checkbox"/> Rickwood Caverns |
| <input type="checkbox"/> Wind Creek | | | |

Date(s) of Park Visit(s): _____

Overview of Park Visit:

Include details about your trip including which park you visited, when you visited, and who was with you. Share memorable moments from your adventure such as what activities you enjoyed the most, the names of trails you hiked or biked, interesting nature sightings, etc.

Photos submitted via: Email Facebook Instagram Twitter Mail

Contestant Waiver:

I, the contestant or contestant's guardian, have read, understand, and agree to abide by the rules of the Alabama State Parks Eighth Day Escape contest. I understand and agree that any questions regarding the interpretation of the rules will be decided by the contest officials, and will accept the decision of the officials in any such matters. I will accept and abide by the decisions of the officials regarding winners of the contest. By submitting this entry form, I will allow my photos and any written material from my entry to be published by the Alabama Department of Conservation and Natural Resources. I understand I must submit photos for my entry to be valid. My signature below signifies my agreement with the statements herein.

Contestant Signature: _____ Date: _____

If under 18, parent signature required: _____ Date: _____