

APRSAF Poster Making Competition – 2025 Theme: Lunar City



Poster Contest Submission Form

SCHOOL INFORMATION

Principal / Head of the School	
School Name Complete Address	
Complete Address	
Contact (Landline/Mob)	
E-mail address	
City (District/Tehsil)	Province Zip
STUDENT INFORMATION	
Name of Student	
Parents/Guardian Name	
Complete Address	
	Province
Contact (Landline/Mob)	Class
E-mail address	
Date of Birth	(*should be between 1 Jan 2013 to 31 Dec 201
Age as of 31 Dec 2025	(*should be between 6 to 12)
	UNDERTAKING
1. I agree that the result of the	e contest would be final and unchallengeable
2. I agree that the violation of rules and regulations will lead to disqualification	
3. I also agree that submitted drawing / painting will be the property of SUPARCO and	
they may be used for publi	cations or websites, as well as other information materials
	n, I affirm that all above information is correct to main is entry of the child for the Poster Making Contest.
Signatu	e of Teacher