

Congressional Art Competition Entry Form

Artist Information

Full Name: _____
First *Last*

Date of Birth: _____ Grade: _____ Gender: _____

Address: _____
Street Address

City *State* *ZIP Code*

Phone: _____ Email: _____

Parent/Guardian Name (if under 18): _____
First *Last*

Phone (if under 18): _____ Email (if under 18): _____

Education

Name of High School: _____

Teacher Name: _____

Teacher Phone: _____ Teacher Email: _____

Art

Please note that art may be no larger than 26x26x4 and must be two-dimensional

Title of Entry: _____

Medium: _____

Description:

Please attach a photo of your piece to this document.

Agreement and Signature

I hereby certify that, to the best of my knowledge, the art entry described above is an original work of authorship by the undersigned student and that it is not copied from, nor does it include, any other person's copyrighted work. I grant the right to publicly display the art entry and grant the right to reproduce the art entry for any non-commercial purpose. The undersigned further release the Member and their employees from any liability for damage, loss, or misappropriation of the art entry during and subsequent to the Art Competition.

Student Signature: _____ Date: _____

Parent/Guardian Signature (if under 18): _____ Date: _____