



Student Artist Submission Form

Name: _____ Submission Title: _____

School: _____ Grade: _____ Email: _____

Medium: Oil & Acrylic - Pencil & Ink Sketch - Mixed Media - Digital - Watercolor - Sculpture.

Contact Information

Please fill it in neatly: ~~XXXXXXXXXXXXXXXXXXXX~~ 2020

Name _____

Address _____

City _____

Zip _____ State _____

E-Mail Address _____

Phone () _____

Mandatory Contact Information For 17 and Under

Children 17 and under must provide a local or cellular phone number of a responsible adult (18+).
No exceptions!

Name of Contact Person: _____

Address _____

City _____ State _____

Zip _____ Phone () _____

E-Mail Address _____