



***"Diverse-City": Embracing Differences in Your City
Art Competition Entry Form***

Artist's Name: _____

Grade: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

School: _____ District: _____

Art Teacher's Name: _____

Teacher's Email: _____ Phone: _____

Title of Artwork:

Please describe your artwork (continue on back or additional sheet if necessary).

I affirm that this entry is my original work. I grant Diversity Awareness Partnership permission to use my work in ways deemed appropriate such as reproducing it onto calendars, publications, and other communication vehicles with no compensation other than credit with the artist's name. I agree that if I am a winner, my name may be published or displayed as a competition winner. If I do not choose to keep my artwork, it becomes the property of Diversity Awareness Partnership. Diversity Awareness Partnership reserves the right to use the winning entries as part of a traveling exhibit and makes no guarantees against damage or loss of entry. I understand that my entry may be auctioned/sold to raise money for competition expenses.

Signature of Artist: _____

Date: _____

Signature of Parent: _____

Date: _____