

Youth Art Exhibition

Entry Form

Entrant Name _____ Entry # _____

Medium _____ 2D 3D

Address _____

City _____ State _____ Zip _____

Phone _____

Youth

Class Instructor _____ Phone _____

I give permission for the ACA to feature my student's photograph and artwork on their website and in the mentioned publications and public locations.

Adult Student Name: _____ Signature: _____

Youth Student Parent/Guardian

Name: _____ Signature: _____

Date _____

Phone : _____

Label

Must be attached to the back of each entry.

Please use one per entry.

Name _____
Phone _____ Email: _____
Instructor: _____ Medium: _____
Category: Youth <input type="checkbox"/> 2D <input type="checkbox"/> 3D <input type="checkbox"/>