

Entry Form

School _____

Artist Name _____

Address _____ City _____ State _____ Zip _____

Home phone _____ Cell phone _____ Email _____

Entry #1 Title _____ Entry #2 Title _____

Medium _____ Medium _____

Price _____ or Insurance value _____ Price _____ or Insurance value _____

PLEASE PRINT CLEARLY WITH BLACK INK. TAGS WILL BE USED TO LABEL WORK IN GALLERY

Entry no. 1

School _____

Artist _____

Title _____

Medium _____

Price _____ or Insurance value _____

Entry no. 1 Accepted

School _____

Artist _____

Title _____

Entry no. 2

School _____

Artist _____

Title _____

Medium _____

Price _____ or Insurance value _____

Entry no. 2 Accepted

School _____

Artist _____

Title _____