

**DUE BY
MARCH 29**

2019 DIVERSE-CITY ART COMPETITION



ENTRY FORM

Artist's Name: _____ Grade: _____ Birthday: _____

Home Address: _____

City

State

Zip

Phone: _____ Email: _____

School: _____

Art Teacher/School Representative Name if Applicable: _____

Teacher's Email: _____ Phone: _____

Title of Artwork: _____

Artwork Type (i.e. painting, graphic design, sculpture, etc.): _____

Describe/explain how/why your artwork represents diversity and inclusion. Attach an additional sheet if necessary.

Check here if you do not want your name or school displayed with your work.

I/We affirm that this entry is my original work. I/We donate the artwork submitted for the Diverse-City Art Competition to Diversity Awareness Partnership. I/We grant Diversity Awareness Partnership permission to use my work in ways deemed appropriate, such as reproducing it onto calendars, publications, social media, and other communication vehicles with no compensation other than credit with the artist's name. I/We understand that my entry may be auctioned/sold to raise money for competition expenses.

Signature of Artist: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

All submissions must be delivered or mailed to Diversity Awareness Partnership (40 N. Rock Hill Road, Webster Groves, MO 63119) by March 29, 2019. Contact Bridget McDonald, Program Coordinator to set up a drop-off time or with any questions at b.mcdonald@dapinclusive.org