



Recyclable Art Contest Form

Student Name: _____

Guardian email: _____

Guardian phone: _____

Title of Work: _____

How does your work need to be displayed? Wall Table Pedestal

Grade: _____

School/Organization: _____

Teacher/Leader email: _____

Teacher/Leader phone: _____

Art work will be held for only 14 days after pick up date.

By signing this form you acknowledge that
drop off is March 29 & 30, 9am-5pm and pick up is April 22, 6:15-8 pm.

Please contact us if any other arrangements need to be made.

Guardian Signature: _____