

CESAR E. CHAVEZ MEMORIAL COMMITTEE OF PINAL COUNTY
2019 ART COMPETITION
INDIVIDUAL APPLICATION FORM

Student Name _____ Email _____

Home Address _____

City _____ State _____ ZIP _____

Home Phone (_____) _____ Age _____ Grade _____

Art Teacher Name _____

School _____ School Phone (_____) _____

School Address _____

School: City _____ State _____ ZIP _____

Project Description _____

RELEASE FORM

I, _____ understand that the finished artwork will become the property of the Cesar E. Chavez Memorial Committee of Pinal County. I agree to allow my project to be exhibited and published and release Cesar E. Chavez Memorial Committee of Pinal County from liability for loss or damage to my work.

(Artist's Signature)

(Parent/Guardian's Signature)

DEADLINE – FEBRUARY 13, 2019, 5:00 P.M.