

### **Youth Art Month - Student Artwork/Flag Release Form**

I agree to allow my artwork and/or flag to be a part of state and national art exhibits for Youth Art Month. As part of this participation, artwork and/or flag may be displayed in the news media or electronically via the internet or in other displays for educational, non-profit, visual art publications, and exhibitions. Artwork may also be displayed, photographed and/or published for Council for Art Education, its website and other social media outlets.

YES

NO

Suggestion – Make 3 copies of the completed Entry Form for each artwork. Attach 2 copies to the back of the artwork (one will remain permanently on the artwork and one will be removed for Youth Art Month files. Keep the third copy for your records.

I agree to allow my name, grade, school district, and photograph to be used in the news media or electronically via the internet or in other displays for educational, non-profit, visual art publications, and exhibitions. Photographs may also be displayed and/or published for Council for Art Education, its website and other social media outlets.

YES

NO

If you answer YES to any of the questions, a copy of this form MUST be submitted to Council for Art Education at [youthartmonthCFAE@gmail.com](mailto:youthartmonthCFAE@gmail.com).

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_

TITLE OF ARTWORK \_\_\_\_\_ MEDIUM \_\_\_\_\_

SCHOOL DISTRICT \_\_\_\_\_

SCHOOL (Full Name) \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

Dr. Mr. Mrs. Ms. TEACHER \_\_\_\_\_

TEACHER EMAIL \_\_\_\_\_

TEACHER PHONE \_\_\_\_\_ NAEA Membership # \_\_\_\_\_

Dr. Mr. Mrs. Ms. PRINCIPAL'S NAME \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_

PARENT NAME \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_

(Required if student is under 18 years of age)

\*PARENT EMAIL \_\_\_\_\_

STUDENT ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE # \_\_\_\_\_

This form must accompany all artwork and flag design submissions.