**2018 Commonwealth of Virginia Campaign (CVC)**

**Poster Contest**

**STUDENT ENTRY FORM**

#### **A completed entry form must be attached with tape to the back of each submitted artwork.**

#### **Please Print**

**Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_ Grade \_\_\_\_**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Telephone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Visual Arts Classroom Parent/Guardian**

Teacher email address (*for award notification*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Or**

Parent/Guardian email address (*for award notification*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### School Division \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (student name) hereby submit my original artwork to be judged for the **Commonwealth of Virginia Campaign (CVC) Poster Contest.** I understand that no entries will be returned. If my artwork is selected for reproduction, the CVC reserves the right to enhance and/or reproduce the original artwork in order to promote the Commonwealth of Virginia Campaign.

 *Student Signature Date*

 *Parent or Guardian Signature Date*

 Parent/Guardian email address (*for award notification*)