

WAUWATOSA HISTORICAL SOCIETY

2017

# Historic Site Art Contest

## Contact Information and Release Form

To Be Attached to Each Piece of Artwork Submitted

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Historic Site: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

School: \_\_\_\_\_

Art Teacher: \_\_\_\_\_

*I give permission for my child's name to be used for publicity announcing the winners of this contest:*

\_\_\_\_\_  
Signature of Parent/Guardian

*I give permission for my son/daughter's artwork to be used on materials published by the Wauwatosa Historical Society:*

\_\_\_\_\_  
Signature of Parent/Guardian

Date: \_\_\_\_\_

The information above will also be used to notify the winning entrants.

