

Celebration of Visual Arts Application Form

“Vizzi” Award

Name: _____ Home phone: _____

Parent/Guardian Name: _____

Address: _____

School Name: _____ Grade: _____ Age: _____

Interest After High School: _____

Clubs/Organizations/Extracurricular Activities: _____

Category: (please circle only one)

Journalism

News Story

Feature Story

Number of words _____

Title of Work _____

Photography

Black and White Photo

Color Photo

Graphic Design

Ad Design

Page Layout

Graphic Communications

Tri-fold Brochure

Two-Color Printed Piece

By signing and submitting this form, I am entering my work for entry into *The Celebration of Visual Arts “Vizzi” Awards Contest*. The work I am submitting is MY own and not the work of anyone else. I have not plagiarized or used any copyrighted material. I fully understand that violation of this will result in my full dismissal from the contest. I also fully understand that the overall decision of the judges is final and not open for debate. By signing below I also give permission for the Visual Arts Committee to publish my information and work for promotional purposes.

Signature

Date

School Sponsor & Title: _____
(teacher, guidance counselor, advisor)

Signature of School Sponsor

Date