



East Tennessee Regional Student Art Exhibition Entry Form

PLEASE FILL IN THE BLANKS, SAVE, PRINT AND ATTACHED (2) COPIES TO THE ARTWORK

IF WE CANNOT READ THIS FORM, THE STUDENT'S WORK IS NOT ELIGIBLE

STUDENT INFORMATION

Student Name: _____ Grade: _____

Parents(s)/Guardian Name(s): _____

Address: _____

City: _____ County: _____ State, TN Zip: _____

E-mail: _____

Phone: _____ Cell: _____

TEACHER/SCHOOL INFORMATION

Teacher's Name: _____

Teacher's Home Phone: _____ Cell: _____

School's Name: _____ Phone: _____

Teacher's E-mail: _____

ENTRY INFORMATION (Please attach the entire form to the artwork)

Entry Title: _____

Category: _____ Media: _____

RELEASE INFORMATION

I give permission for the Knoxville Museum of Art to display my art and to use it in any promotional materials created for the *East Tennessee Regional Student Art Exhibition*. I fully understand that the Knoxville Museum of Art and the Student Art Exhibition Committee will take reasonable care of entries and that I must reclaim my work by the date requested. I understand that the Knoxville Museum of Art will assume no liability for lost or damaged work. I also understand that if selected for the Best of the Best exhibition my work cannot be picked up until the conclusion of that exhibition.

Parent/Student's Signature

Date

Teacher's Signature

Date