

**DFVA 2017 Excellence in Drawing Calendar Contest
Application Form**

Title of Drawing: _____

Name: _____

Address: _____

City: _____ Zip Code: _____

Telephone _____ Grade _____

School _____

Art Teacher Name _____

Art Teacher Email _____

**The following awards are conducted at the artists' studios.
Students must provide their own transportation.**

•Applicant for the Neilson Carlon Award YES _____ NO _____

•Applicant for the Cynthia Swanson Award YES _____ NO _____

•Applicant for the the Riva Brown Award YES _____ NO _____

May we also use your artwork in DFVA promotional materials such as fliers or newsletters?
Credit will be given to the artist. Yes _____ No _____

Please attach this form to the back of your artwork.

NAME _____

TITLE _____

SCHOOL _____

GRADE _____

Please attach this label to the front, lower right corner of your artwork.

Entries due March 10, 2016