School Participation/Tabulation Form

Email this form to the Chairperson 30 days before the Art Festival or by the Chairperson's deadline.

School _____ Phone _____

Address _____ City _____ State _____ Zip _____

School Coordinator _____ Coordinator's Email _____

I affirm that all student entries are original works and do not infringe on copyright laws. _____

School Coordinator's Signature

Total Number of Entries _____ (*24 maximum*)

FOR CHAIRPERSON USE ONLY

Grade	Student Name by Grade from K-6	Entry Title	Category	Media	Score #1	Score #2	Score #3	Total Score	Avg. Score	Award

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