



Candlelighters.
CHILDHOOD CANCER FAMILY ALLIANCE

create for candlelighters Summer Art Contest

Submit this form along with your artwork. One form per entry.

DO NOT FOLD ART. Contest begins July 1, 2017—Contest ends August, 15, 2017.

Child's Name: _____ Child's Age: _____

If Patient Child's Diagnosis: _____ Child's Hospital: _____

Child's Grade Level: _____ Child's School District: _____

Child's School: _____

Please select artwork category:

Abstract Cars/Busses/Trains Fantasy Nature Sports What You Love

Please give your piece of artwork an original title:

Inspiration for this piece of art, or reason for creating it: _____

Parent/Guardian's Name: _____

Parent/Guardian's Phone Number: _____

Parent/Guardian's Email Address: _____

I give permission for my child to participate in the 2017 Create for Candlelighters Summer Art Contest. I also understand that my child's artwork will become property of Candlelighters Childhood Cancer Family Alliance upon submission. I consent that it can be displayed on Candlelighters' website and social media, as well as reproduced and used in publications and other marketing that may include my child's name, age, and diagnosis.

Guardian's Name Printed

Guardian's Signature

Date