2011 Congressional Art Competition Student Information/ Release Form

MEMBER:	STATE:
Note: This information is used for program	m certificates. Please make sure the form is complete and correct.
ART STUDENT NAME:	GRADE:
NAME OF PARENT OR GUARDIAN: _	
HOME ADDRESS:	
CITY:	STATE: ZIP:
PHONE: (HOME)	(WORK)
SCHOOL:	
ART TEACHER:	
SCHOOL ADDRESS:	
ART TEACHER PHONE:	
TITLE OF ENTRY:	
MEDIUM :	(Be Specific) FRAME DIMENSIONS:
Student email:	T-Shirt Size
I hereby certify that, to the best of my known	Originality Certification owledge, the art entry described above is an original work or ad that it is not copied from, nor does it include, any other
Teacher Signature and Date	Student Signature and Date
undersigned student to which the student is entitled of Member of Congress designated above in <i>An Artistic</i> Representatives) and intending to be legally bound he display the art entry, if it is selected for display, in an latest date on this form. The undersigned acknowled the Capitol will be made by a House panel chaired be their employees and agents, and the United States the undersigned further grant the Member, the House, the damage, loss, or misappropriation of the art entry du indemnify, hold harmless and defend the Member, the claims of any nature whatsoever, including, but not lof or in any way related to the submission of the art.	
Parent/Guardian Signature and Date	Student Signature and Date