

# Spring Thaw 2024 Entry Form

Please print

Complete and attach to back of artwork

Name	_____
School	_____
Grade	_____
Title	_____

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Name	_____
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# Spring Thaw 2024

Complete and turn in this portion when submitting your artwork

Name	_____
School	_____
Grade	_____
Address	_____ _____
Phone	_____
Email	_____
Category:	<input type="checkbox"/> 2D <input type="checkbox"/> 3D <input type="checkbox"/> Photo <input type="checkbox"/> Digital <input type="checkbox"/> Writing
Title	_____
Artwork can be used for promotional purpose:	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/>	Unless checked here, the Arts Council may use your contact information to notify you of classes or events.

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