

**PLEASE PRINT CLEARLY IN ENGLISH AND ENCLOSE THIS FORM WITH THE
ARTWORK DEADLINE FOR SUBMISSION IS FEBRUARY 17, 2016**

Artist Information:	
Full Name (First, Last)	
____/____/____	
Birth Date (MM/DD/YY)	
Phone Number	E-mail Address
_____	_____
School Mailing Address (Street, City, State, Zip Code, Country)	

Title of Artwork	

Sister Cities Member Sponsor Information:	
Sister City Program Sponsoring the Entry	

Sister City Contact Person	
Phone Number	E-mail Address
_____	_____
Sister City Program Address (Street, City, State, Zip Code, Country)	

Artist Statement

All submissions must be original work and comply with Sister Cities International's plagiarism policy.
For more info, visit this link: <http://bit.ly/SClplagiarism>

ARTIST'S WAIVER

I understand that all showcase entries become the artistic property of Sister Cities International. Although the artist retains his/her copyright for other uses, Sister Cities International will retain perpetual, non-exclusive rights to use submitted artwork in any future publication, promotional material, and/or online service with no compensation other than credit with the artist's name and community. Sister Cities International takes no responsibility and will not compensate for any lost or damaged artwork.

By submitting this entry, I agree to give Sister Cities International, its members and affiliates permission to publish and display the submitted entry at public exhibits, online, in publications and/or in promotional materials, at the discretion of Sister Cities International. I agree to abide by all the rules and terms of the showcase and agree to waive all claims of any kind against the showcase organizers.

Date

Signature of Artist

Date

Signature of Parent/Guardian

WOULD YOU LIKE THE ARTWORK RETURNED?

- NO, I hereby donate my artwork to Sister Cities International.
- YES, I would like my artwork returned. An additional \$20 return fee is included with this entry form.

If the art is to be returned, please indicate below the recipient's address. P.O. Boxes cannot be accepted by the mail service.

The return address is:

SEND ENTRIES TO:

Miss Catherine Nexsen
3211 Floyd Avenue, Richmond, VA 23221

MORE INFORMATION:

RichmondSisterCities@gmail.com or (804) 355-2780